

4-H Enrollment Form (For Youth Only)

Participant's Name _____ Email Address _____
 Age _____ Street Address _____
 Birth Date _____ City _____
 Grade _____ Zip Code _____
 Gender Male Female Primary Phone _____

Parent/Guardian Name _____
 Cell Phone _____
 Emergency Contact Name _____
 Phone _____
 Relationship to participant _____

Ethnicity _____ Are you of Hispanic ethnicity? No Yes

Race White Native Hawaiian or Pacific Islander
 Black Asian
 American Indian or Alaskan Native Prefer Not to State

Residence Farm (rural area where agricultural products are sold) Suburb of city more than 50,000
 Town under 10,000 and rural non-farm Central city more than 50,000
 Town / City 10,000 - 50,000 and its suburbs

Military No one in my family is serving in the military I have a parent serving in the military
 I have a sibling serving in the military

Branch Air Force Army Coast Guard DOD Civilian Marines Navy
 Component Active Duty National Guard Reserves

School Name _____
 School Type Public School Homeschool / Alternative
 Private School Magnet / Specialized School
 Special Education Charter School
 Vocational Education

Indicate the Club(s) you wish to join _____

Indicate the Project area(s) in which you wish to participate _____

Physician's Name _____

Physician's Phone _____

List any health or medical needs to be aware of _____

I have read the 4-H Code of Conduct and agree to live up to these expectations while participating in 4-H programs and events. I am aware that all my actions and decisions affect others. I realize that my failure to act with good character could result in loss of privileges, consequences, and suspension from the event or program, or for future programs or events. I am willing to accept the appropriate and logical consequences of my actions. As a participant in a 4-H sponsored program, I release the County , State Extension programs and personnel, Utah State University and those affiliated from liability should I accidentally be injured due in part to my own negligence.