

## 4-H Enrollment Form



Name of 4-H G	roup/Unit:					Year:		
Firs		Middle	Las	İ				
Address:		City		St	ate	Zip Code		
~	E1	•				•		
						-		
	ale    Female Date of Bi				001 A	ttenaing:		
S	n 4-H, how many years	have you been in	n 4-H: _					
•	Choose only one) ☐ Town under 10,000 people or rural non-far☐ City 10,000-50,000 people			☐ City over 50,000 people  rm ☐ Suburbs of city over 50,000 people ☐ Military installation:				
If yes, circle all th	rent/guardian(s) active nat apply: Army Air For	ce Navy Marine	es Coast	Guard Natio		uard(Air & Army) Reser	rves	
Ethnic group:*	A. Choose One:	Hispanic or Latino	□ Non-	Hispanic or L	atino			
В.	Choose all that apply:  White or Caucasian Black or African-An American Indian or			Hawaiian or o		Pacific Islander		
Parent or Guard	lian:							
	First	Midd	le		Last			
Address: Street Address	<u> </u>	City			State	Zip Code		
	Daytime/Cell phone	Area Code Home pho	one	()	Email	(if applicable)		
Additional Pare	nt or Guardian: First	Mid	ldle		Last	<u> </u>		
Address:								
Street Address		City		\$	State	Zip Code		
Area Code	Daytime/Cell phone ()	Area Code Home pho	Code Home phone		Email	(if applicable)		
Extension educational	l, promotional, and/or market	agree to allow 4-H to ing materials. Neither do not wish for 4-H to	take photog individual a	raphs/audio/vide addresses nor tel	eo of m	ny child for use in 4-H and of	ther N.C. Cooperative within these materials.	
	th is bound by the NC 4-H Co							
laws; your response	s required for all federally as s will not affect consideration ondiscriminatory manner.	n of your application.		ng this informat		ou will assist us in assuring  For office	that this program is use only	
AGRICULTURE & LIFE SCIENCES  ACADEMICS A RESEARCH A EXTENSION						4-H Membership # Date entered:		

NC STATE UNIVERSITY

Revised 10/21/13