



# 4-H Alumni Registration Form

First Name

Last Name

Address

City and State

Zip Code

Telephone Number

Email Address

I was a 4-H member in the state of:

I was a 4-H member in the county of:

I was a 4-H member during the year(s) of:

I would like to volunteer to help!

Yes

No

Mail or email this completed form to the county 4-H agent. Thanks!