

4-H CLUB REGISTRATION SHEET

Michigan State University Extension - Isabella County 4-H Youth Programs

Name of 4-H Club: _____

When Club Meets: _____

Where Club Meets: _____

Administrative Leader: _____

Address: _____

Phone Numbers: Home() _____ Cell/Work() _____

Email: _____

CLUB OFFICERS

DATE ELECTED

President _____

Vice President _____

Secretary _____

Treasurer _____

Others _____

EIN# _____ for account in this bank _____

<u>Insurance Coverage Information:</u>	
# of Members _____ x \$1	= _____
# of Leaders _____ x \$1	= _____
# of Horse Members in speed events only _____ x \$4	= _____
# of Horse Leaders in speed events only _____ x \$4	= _____
	TOTAL _____
<u>Participant Fee:</u>	
Amount from Participation Fee Form	TOTAL _____
TOTAL AMOUNT Paid to MSU Extension Office \$ _____	
<i>*Please make checks payable to Michigan State University</i>	

Affirmative Action Statement: This club understands that affiliation with 4-H and Michigan State University Extension programs is granted on the basis that membership in the club is open to all without regard to race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, marital status or family status, and that every effort will be made to recruit new members in keeping with the makeup of the surrounding community or neighborhood.

Administrative Leader

Date

