



University of Nevada
Cooperative Extension



OFFICE USE ONLY

Date Received: _____

Fees Paid (if required): _____

Member ID#: _____

Date Processed: _____

Cloverbud: Yes No

LINCOLN COUNTY 4-H YOUTH MEMBER ENROLLMENT FORM

(Please complete and read all information on both sides of form before returning to 4-H Leader.)

(4-H Leaders please return completed form to your County Cooperative Extension/4-H Office as soon as possible.)

Last Name		First Name	
Email		Preferred Name	
Mailing Address		City	
State		Zip Code	
Birth Date		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Primary Phone		Cell Phone	
Years in 4-H			

Parent / Guardian 1

Correspondence Pref. Postal Mail Email

First Name		Last Name	
Cell Phone		Email	

Parent / Guardian 2

First Name		Last Name	
Cell Phone		Email	

Second Household

Send Correspondence	<input type="checkbox"/> YES <input type="checkbox"/> NO	Correspondence Pref.	<input type="checkbox"/> Postal Mail <input type="checkbox"/> Email
Family Name		First Names	
Primary Phone		Address	
City		State	
Zip Code		Email	

Emergency Contact

Name		Phone	
Email		Relationship	

Enrollment

Race/Ethnicity	<input type="checkbox"/> White	<input type="checkbox"/> Native Hawaiian or Pacific Islander
	<input type="checkbox"/> Black	<input type="checkbox"/> Asian
	<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Other
	<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Prefer not to answer
Residence	<input type="checkbox"/> Farm	<input type="checkbox"/> Town under 10,000 and rural non-farm
Military	<input type="checkbox"/> No one in my family is serving in the military	<input type="checkbox"/> I have a parent serving in the military
Branch / Component	<input type="checkbox"/> Air Force <input type="checkbox"/> Army <input type="checkbox"/> Coast Guard <input type="checkbox"/> Marines <input type="checkbox"/> Navy / <input type="checkbox"/> Active Duty <input type="checkbox"/> National Guard <input type="checkbox"/> Reserves	

Grade		School Name	
School Type	<input type="checkbox"/> Public School	<input type="checkbox"/> Homeschool / Alternative	

4-H Project Clubs

4-H Leader
