



20_____ Member Enrollment Form

***Required Information**

Personal Information

County of 4-H Participation _____ 4-H Club/Group: _____

*First Name _____ MI _____ *Last Name: _____

Alternate Name _____ New Member? Yes No

*Birthdate (MM/DD/YYYY) ____/____/____

*Primary Phone (____) _____ - _____ Mobile (____) _____ - _____

*Primary Member Email: _____ Secondary Member Email: _____

Do you want to receive text messages? Yes No Mobile carrier: _____

School: _____

*Military Family Yes No

Military Families are those that have an immediate family member (parent/guardian; step-parent; sibling) regardless of branch.

Status: Active Reserve Retired Branch: _____

Do you want 4-H Mailings? Yes No

Do you prefer email newsletters?: Yes No

Does this participant have health considerations or special needs: Yes No

If yes, please describe _____

Address Information

*Street 1 _____ Street 2 _____

*City _____ *State _____ *Zip _____

Demographic Information

*Gender Female Male

***Residence**

- Farm Rural or Town
- <10,000
- Town 10,000 – 50,000
- Suburb > 50,000 City > 50,000

Ethnicity (Optional, Select one)

- Not Hispanic Hispanic

Race (Optional, Select all that apply)

- Asian White Black
- American Indian Hawaiian/Pacific Islander

OFFICE USE ONLY

Paid Cash Check # _____ Receipt # _____ In other county _____

Participation Fee Scholarship Requested Scholarship Approved 4-H Staff initials: _____

Capped (child 4 or higher)

Parent Information

Parent or Guardian 1

*First Name _____ MI _____ *Last Name: _____

*Street 1 _____ Street 2 _____

*City _____ *State _____ *Zip _____

*Parent 1 email: _____ Wants 4-H Mailings: Yes No

*Primary Phone (____) _____ - _____ Mobile phone (____) _____ - _____

Parent Work Phone (____) _____ - _____ Permissible to call parent at work? Yes No

Parent or Guardian 2

*First Name _____ MI _____ *Last Name: _____

Street 1 _____ Street 2 _____

*City _____ *State _____ *Zip _____

*Primary Phone (____) _____ - _____ Mobile phone (____) _____ - _____

Parent Work Phone (____) _____ - _____ Permissible to call parent at work? Yes No

*Parent 2 email: _____ Wants 4-H Mailings: Yes No

Siblings enrolled in 4-H: _____

Program Information

*Grade for Program Year: _____ *Primary 4-H Club: _____

Other 4-H clubs enrolled in this year: _____

Project Areas (Circle all that apply)

- | | | |
|---------------------------------------|--|---------------------------------------|
| Aerospace | Dogs | Meat & Food Sciences |
| Ag in the Classroom | Emus and Ostriches | Mechanical Sciences |
| Agronomy | Engines and Transportation | Outdoor Education / Recreation |
| Alpacas and Llamas | Entomology & Bees | Physical Sciences |
| Animal Evaluation (judging) | Environmental Resources Mgmt. | Plant Science |
| Aquatic Science | Environmental Science & Nat. Resources | Poultry Science & Embryology |
| Beef | Expressive Arts | Proud Equestrian Program (PEP) |
| Biological Sciences | Financial Literacy | Rabbits / Cavies |
| Birds and Poultry | Food and Nutrition | Robotics |
| Business and Entrepreneurship | Global and Cultural Education | Safety |
| Career Exploration and Workforce Prep | Goats | Service Learning |
| Cats | GPS / GIS | Sheep |
| Child Development, Child Care | Health and Fitness | Shooting Sports |
| Citizenship and Civic Engagement | Horse & Pony | Small Animals/Pocket Pets/Lab Animals |
| Clothing & Textiles | Horseless Projects | Soils & Soil Conservation |
| College Independent Living Readiness | Horticulture | Swine |
| Communication | Introductory 4-H Projects | Veterinary Science |
| Community Service | Leadership Skills Development | Wildlife & Fisheries |
| Computer & Digital Technology | Leisure Education | Other: _____ |
| Dairy Cattle | Life Skill and Character Education | Other: _____ |

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To be accepted, the Code of Conduct/Media Medical Release page must accompany this enrollment form.