



2016-2017 Macomb County 4-H Club Registration Form

STEP 1: CLUB ENROLLMENT

Club/Program Name: _____ Max. # of members: _____

Type of Club: _____ Community Club _____ Project Club _____ Military Club _____ Mentoring
 _____ In-School Club _____ After-School Club _____ Camping Program _____ Educational Program

Club/Program Location: _____

Meeting Date(s): _____ Time(s): _____

Preferred dates for 4-H staff visit(s): 1st choice _____ 2nd choice _____

Club/Program Web Address: _____

Club/Program Email Address: _____

Send mail/email to: _____

Administrative Leader's Name: _____ Phone: _____

Address: _____

Co-Administrative Leader's Name: _____

Address: _____

Club is racially diverse: Yes / No Community is racially diverse: Yes / No Club Dues? Yes / No (If yes, amount: \$____)

Macomb County MSU Extension has permission to use Club/Program administrative leader contact information (phone number) in the 4-H Program Directory. _____ Yes _____ No Signature: _____

2016/2017 Project Areas:

- | | | |
|--|---|---|
| <input type="checkbox"/> Aerospace | <input type="checkbox"/> Dogs | <input type="checkbox"/> Meat & Food Science |
| <input type="checkbox"/> Ag in the Classroom | <input type="checkbox"/> Emus and Ostriches | <input type="checkbox"/> Mechanical Sciences |
| <input type="checkbox"/> Agronomy | <input type="checkbox"/> Engines & Transportation | <input type="checkbox"/> Outdoor Education/Recreation |
| <input type="checkbox"/> Alpacas and Llamas | <input type="checkbox"/> Entomology & Bees | <input type="checkbox"/> Physical Sciences |
| <input type="checkbox"/> Animal Evaluation | <input type="checkbox"/> Environmental Resource Mgt. | <input type="checkbox"/> Plant Science |
| <input type="checkbox"/> Aquatic Science | <input type="checkbox"/> Envir. Sci. & Natural Res. | <input type="checkbox"/> Poultry Sci. & Embryology |
| <input type="checkbox"/> Beef | <input type="checkbox"/> Expressive Arts | <input type="checkbox"/> Proud Equestrian Program |
| <input type="checkbox"/> Biological Sciences | <input type="checkbox"/> Financial Literacy | <input type="checkbox"/> Rabbits/Cavies |
| <input type="checkbox"/> Birds and Poultry | <input type="checkbox"/> Food and Nutrition | <input type="checkbox"/> Robotics |
| <input type="checkbox"/> Business & Entrepreneurship | <input type="checkbox"/> Global & Cultural Education | <input type="checkbox"/> Safety |
| <input type="checkbox"/> Career Expl. & Workforce Prep. | <input type="checkbox"/> Goats | <input type="checkbox"/> Service Learning |
| <input type="checkbox"/> Cats | <input type="checkbox"/> GPS/GIS | <input type="checkbox"/> Sheep |
| <input type="checkbox"/> Child Development/Child Care | <input type="checkbox"/> Health and Fitness | <input type="checkbox"/> Shooting Sports |
| <input type="checkbox"/> Citizenship & Civic Engagement | <input type="checkbox"/> Horse & Pony | <input type="checkbox"/> Pocket Pets, Sm./Lab Animals |
| <input type="checkbox"/> Clothing & Textiles | <input type="checkbox"/> Horseless Projects | <input type="checkbox"/> Soils & Soil Conservation |
| <input type="checkbox"/> College/Indep. Living Readiness | <input type="checkbox"/> Horticulture | <input type="checkbox"/> Swine |
| <input type="checkbox"/> Communication | <input type="checkbox"/> Introductory 4-H Projects | <input type="checkbox"/> Veterinary Science |
| <input type="checkbox"/> Community Service | <input type="checkbox"/> Leadership Skills Dev. | <input type="checkbox"/> Wildlife & Fisheries |
| <input type="checkbox"/> Computer & Digital Tech. | <input type="checkbox"/> Leisure Education | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Dairy Cattle | <input type="checkbox"/> Life Skill & Character Educ. | |

CLUB INFORMATION

**Michigan State University Extension
Macomb County 4-H Youth Program**

Civil Rights Compliance Statement

Name of Group (Club): _____

Primary Location: _____

I understand that the use of the 4-H name and emblem is granted on the basis that membership in the group named above is open to all without regard to race, color, national origin, gender, gender identity, religion, age, height, weight, disability, political beliefs, sexual orientation, marital status, family status, or veteran status.

Signature of Club Administrative Leader

Date

Annual Summary Financial Report

For the Period September 1, _____ to August 31, _____

Club or council name: _____ EIN: _____

Account balance at beginning of year:		plus	A
Taxable sales revenue (list each separately):			
1.			
2.			
3.			
Sales subtotal (add items 1-3 above)	B		
Grant and other nontaxable activities revenue (list each separately):			
1.			
2.			
3.			
Nontaxable sales total	C		
Total revenues for year (add sales and nonsales subtotals)		plus	D
Expenditures			
1.			
2.			
3.			
4.			
5.			
6. Sales tax*			
Total expenses for year (add lines 1-6 above)		minus	E
Account balance at end of year		equals	F
Add back checks that haven't shown up on bank statement		plus	G
Subtract deposits that haven't shown up on bank statement		minus	H
Adjusted balance (should agree with bank statement; include a clear copy of bank statement that agrees with this total adjusted balance)		equals	I

Prepared by: _____ Date: _____

Reviewed and approved by: _____ Date: _____

Approved by MSU Extension: _____ Date: _____

*If the Sales Subtotal (B) is less than \$5,000, you don't have to figure sales tax because your 4-H club or group owes no sales tax. If the Sales Subtotal (B) is \$5,000 or more, divide the Sales Subtotal (B) by 17.67 to get the amount of sales tax your group must remit.

The following may be turned in with pages 1-4, or as soon as the information becomes available.

- Club Bylaws or Club Rules (Use [Bylaws Guidelines](#), [Bylaws Worksheet](#), and/or [Bylaws Worksheet for Cloverbud Groups](#) as guides)
- Completed [MI 4-H Shooting Sports Parental Permission & Acknowledgement of Risk](#) form for each youth participating in 4-H Shooting Sports projects and/or events.
- State 4-H Participation Fee payments (\$10 per member, max. \$30 per family, paid only once annually, in the county where youth's primary club is located. Families unable to pay the State 4-H Participation Fee must turn in a completed [Macomb Co. 4-H Youth Council Participation Fee Scholarship Application](#) in lieu of payment. Make checks out to MSU).
- Copy of completed [insurance form](#) (Insurance is optional)

Club Officer Information:

President/Chair: _____ Term Expires: _____

Vice President/Vice Chair: _____ Term Expires: _____

Secretary/Clerk: _____ Term Expires: _____

Treasurer: _____ Term Expires: _____

Reporter: _____ Term Expires: _____

Historian: _____ Term Expires: _____

Other: _____ Term Expires: _____

_____ Our club/committee does not have officers



2016-2017 Macomb County 4-H Club Registration Form

STEP 2: 4-H MEMBER & VOLUNTEER ENROLLMENT/RE-ENROLLMENT

Members and volunteers may enroll online AFTER the club leader has returned the completed 2015-16 Annual Summary Financial Statement, Club/Committee Inventory Report, 2016-17 Club Registration Form, and Civil Rights Compliance Statement to Macomb County MSU Extension.

New and returning members and screened volunteers must enroll/re-enroll online at <https://mi.4honline.com>. See [4-H Online Guide for Families](#) for information about enrolling for the first time. See [Re-enrolling through 4-H Online](#) for information about re-enrolling via 4-H Online.

All adult volunteers must be screened before enrolling online. Adults that would like to become screened volunteers should complete and return the [4-H Volunteer Application](#) to:

Macomb County MSU Extension
Attn: 4-H VSP/Confidential
21885 Dunham Road, Suite 12
Clinton Township, MI 48036

OR

Fax to: 586-469-6948
Attn: 4-H VSP/Confidential

4-H Club Roster for 2016-2017

Club Name: _____

Organizational Leader: _____ Phone Number: _____

IMPORTANT: Youth members must enroll/re-enroll online at <https://mi.4honline.com>. Online enrollments will not be approved until the participation fee is paid.

YOUTH MEMBERS:

Name	Primary Club	Primary County (if not Macomb)	County where participation fee payment was made (if not Macomb)

4-H Club Roster for 2016-2017

Club Name: _____

Organizational Leader: _____ Phone Number: _____

IMPORTANT: Adult volunteers must be screened and enroll/re-enroll online annually at <https://mi.4honline.com>.

SCREENED ADULT VOLUNTEERS:

Name	Primary Club	Primary County

2016-17 4-H Participation Fee Form for CLUBS

Club Name: _____

Organizational Leader: _____

Phone Number (including area code): _____

Number of youth in club (only those paying as individuals, including Cloverbuds)	A+	x \$10 each =	\$
Number of families with four or more siblings in 4-H	(Don't include in total youth #)	x \$30 maximum = per family	
Number of youth included in "family" count above	B+		
Number of youth in club who are also in <i>another</i> primary club*	C+		
Number of youth eligible for fee scholarship	D+		
Total number of youth in club	=E	Total	\$
Payment	<input type="checkbox"/> Cash	<input type="checkbox"/> Check #	

- Send form and fees with 4-H enrollments to the MSU Extension office before your club members and volunteers begin enrolling online.
- Fees are to be collected by the club, and the club may issue one check to the MSU Extension office. Checks should be made out to _____ MSU.
- Half of the participant fee will be kept in the _____ Macomb _____ County 4-H program.

****All fees need to be paid to the 4-H participant's primary club. If there are youth in your club who have already paid in their primary club, list their names and the name of their primary club on the next page. This will help us***