

# 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: \_\_\_\_\_

Type of Club: \_\_\_\_\_ Community \_\_\_\_\_ Project \_\_\_\_\_  
(name of project)

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 \_\_\_\_\_

### **Insurance Coverage Information:**

# of Members \_\_\_\_\_ x \$1 = \_\_\_\_\_

# of Leaders \_\_\_\_\_ x \$1 = \_\_\_\_\_

# of Horse Members in speed events only \_\_\_\_\_ x \$3 = \_\_\_\_\_

# of Horse Leaders in speed events only \_\_\_\_\_ x \$3 = \_\_\_\_\_

TOTAL \_\_\_\_\_

### **Participant Fee:**

# of Members \_\_\_\_\_ x \$10 TOTAL \_\_\_\_\_

TOTAL AMOUNT Paid to MSU Extension Office \$ \_\_\_\_\_

I give permission to the Isabella County MSU Extension to  
release my name and phone number for recruitment purposes.

\_\_\_\_\_ Yes \_\_\_\_\_ No

**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

### **OFFICE USE ONLY**

DATE RECEIVED: \_\_\_\_\_

