

# Sanders County 4-H Enrollment Form

Club: \_\_\_\_\_ 4-H Year 20\_\_\_\_ - 20\_\_\_\_\_

**\*\*\*\*\* FOR OFFICE USE ONLY \*\*\*\*\***

COUNTY CODE: \_\_\_\_\_ CLUB CODE: \_\_\_\_\_ LEADER/MEMBER CODE: \_\_\_\_\_ Drop from 4-H

## MEMBER/LEADER INFORMATION

**Circle One:** Member Cloverbud /Mini 4-H  
 Organizational Leader Project Leader Resource Leader Activity Leader Special

**Circle One:** New Enrollment Re-enrollment

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 School \_\_\_\_\_ Grade \_\_\_\_\_ Year in 4-H \_\_\_\_\_ Teen Leader Y / N  
 Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ Age (as of Oct. 1) \_\_\_\_\_ Gender F / M Fax # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cellular Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 E-mail address \_\_\_\_\_ Is email a reliable way to communicate with you? Yes / No

I want the Extension Office to be aware of the following disability: \_\_\_\_\_

Does anyone in your family serve in the Military, National Guard or Reserves? Yes / No

If Yes, please indicate which branch: Army Navy Air Force Marine

Race (Circle one) Hispanic Not Hispanic

Ethnic (Circle One): White (only) Black/African American (only) Am. Indian/Alaskan Native (only)  
 Asian (only) Native Hawaiian/Pac. Islander (only) White & Black White & AI or AN  
 Black & AI or AN White & Asian Balance (other combination)

Residence (Circle One): Farm Rural/under10,000 Town/ 10-50,000 Suburb/50,000 City/50,000

Project Name	Project Code	Teen Leader	Need Literature	Year In Project
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____

- The 4-H program year is October 1 - September 30. The member's 4-H age is his/her age at the beginning of the 4-H year (Oct. 1). All forms will reflect that age for the entire 4-H year.
- Please be sure to write in your MAILING address so we may send you important 4-H mailings.
- The Extension Office communicates as much as possible by email. Please provide a current email address and notify the Extension Office if changes occur. Hard copies of information are mailed to those without email.
- Contact the Extension Office with any questions. 827-6934 / [sanders@montana.edu](mailto:sanders@montana.edu) / [www.montana.edu/sanders](http://www.montana.edu/sanders)

# PARENT INFORMATION

Member/Leader Last Name \_\_\_\_\_ Member/Leader First Name \_\_\_\_\_ M.I. \_\_\_\_\_

\*\*\*\*\* FOR OFFICE USE ONLY \*\*\*\*\*  
PARENT CODE 1: \_\_\_\_\_

Parent Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cellular Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Send 4-H communications to this parent? Yes / No Occupation (optional) \_\_\_\_\_

Contact Type (*circle one*) Primary Contact Additional Contact Other

Legal Guardian: Yes / No Additional Parent: Yes / No Other: Yes / No

E-mail: \_\_\_\_\_ Is email a reliable way to communicate with you? Yes / No

Would you prefer the 4-H newsletter (*Dispatch*) be sent to you via email? Yes / No

\*\*\*\*\* FOR OFFICE USE ONLY \*\*\*\*\*  
PARENT CODE 2: \_\_\_\_\_

Parent Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cellular Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Send 4-H communications to this parent? Yes / No Occupation (optional) \_\_\_\_\_

Contact Type (*circle one*) Primary Contact Additional Contact Other

Legal Guardian: Yes / No Additional Parent: Yes / No Other: Yes / No

E-mail: \_\_\_\_\_ Is email a reliable way to communicate with you? Yes / No

Would you prefer the 4-H newsletter (*Dispatch*) be sent to you via email? Yes / No

\*\*\*\*\* FOR OFFICE USE ONLY \*\*\*\*\*  
PARENT CODE 3: \_\_\_\_\_

Parent Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cellular Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Send 4-H communications to this parent? Yes / No Occupation (optional) \_\_\_\_\_

Contact Type (*circle one*) Primary Contact Additional Contact Other

Legal Guardian: Yes / No Additional Parent: Yes / No Other: Yes / No

E-mail: \_\_\_\_\_ Is email a reliable way to communicate with you? Yes / No

Would you prefer the 4-H newsletter (*Dispatch*) be sent to you via email? Yes / No

Member Signature \_\_\_\_\_ Leader Signature \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_