## 4-H Event/Activity/Fundraising Form

Date Received
Date Approved

## Request must be submitted to Extension Office two weeks prior to event for approval

Person(s) making request:			Phone:	
Event Start Date:		Event End Date:		
Name of Activity/Event:				
Description (include education	nal purpose, who w	vill benefit from this 4-H eve	ent, activity	v, or fundraising):
·				
Location:				
What will funds/awards be use	ed for:			
Destination of arount muse and a	Club Ass	¢		
Destination of event proceeds:				
	4-H Cour	ncil \$		
	Other	\$		
Permission and Release Forms Permission/Release Form must the Extension Office. Person a fter the event.	at be signed for non	4-H participants.) Permissi	ion/Release	e Forms are available at
Completed form must be returned 2 weeks after completion of 4-H event/activity/fundraiser event.				
Due Date:				

• National/State Policy: All fundraising or use of the 4-H emblem may only be used with approval and is restricted to being used for 4-H educational events or activities. No use of funds can be utilized for a private individual or cause. This approval allows the event or activity to use the 4-H name and emblem. Any trophies or ribbons must contain the 4-H emblem. For additional information, see State 4-H Treasure Handbook.

## 4-H Event/Activity/Fundraising Form (continued)

Expenses: (supplies, rentals, meals, equipment, insurance, mileareceipts) attach additional pages if needed. <u>Amount (\$) Item Description</u>	age—itemize all costs and include copies of all
Total (\$):	
Income: (Itemize registration fees, entry fees, donations—Inclu Amount (\$) Item Description	de copies of deposit slips or receipts)
Total (\$):	
List all 4-H members, leaders and or parents that participated or (attach additional pages if necessary.)	benefit from this event/activity/ or fundraiser:
Signature of MSU Extension Agent Approving Signature	nature of Requestor

Return form to: MSU/Lake County Extension 300  $3^{rd}$  Ave NW Ronan, MT 59864

or by email to lake1@montana.edu

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