Pertinent 4-H Information Sheet

To be completed and submitted to the York County Extension office by November 1st every year.

Name of Club: ______________________________

Town: ______________________________________

Focus of Club: ______________________________
                          (horse/general/rabbit)

Are you accepting new members? Yes___ No___

Do you have a membership limit? Yes___ No___
                          If yes, what is the maximum enrollment for your club? _____ members.

What is your wait list policy?
______________________________________________________________________________
______________________________________________________________________________

Primary Leader/s

Name: ______________________________ Phone: __________________

Name: ______________________________ Phone: __________________

Assistant Leader/s

Name: ______________________________ Phone: __________________

Name: ______________________________ Phone: __________________

Volunteers – Must complete 4-H volunteer training and must be enrolled as a volunteer through 4-H.

Name: ______________________________   Name: ______________________________

Name: ______________________________   Name: ______________________________

Name: ______________________________   Name: ______________________________
Club Officers

Year: 20__

President: ____________________________
Vice President: _______________________
Treasurer: ____________________________
Secretary: ____________________________

Other Officers (optional):

Song Leader: _________________________
Pledge Leader: _______________________
Clink Officer: _________________________
Other: ______________________________