



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: _____

Club Officers

Year: **20**__

President: _____

Vice President: _____

Treasurer: _____

Secretary: _____

Other Officers (optional):

Song Leader: _____

Pledge Leader: _____

Clink Officer: _____

Other: _____