

Name of 4-H Club:	
Name of Organizational Club Leader:	
Method of Contact: E-Mail	Phone
Regular Club Meeting Location:	
Regular Club Meeting Day & Time:	
Do you offer Cloverbud Programming?	Yes: No:
Copy of Constitution and By-Laws on File in County Office:	Yes: No:
I have read and understood Use of 4-H Name and Emblem	Yes: No:
I have read and understood Handling of Funds in 4-H Organizations	Yes: No:
Signature:	

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