Fayette County 4-H

Enrollment Card

2023-2024

Address:	City:			Zip:	
School: _				Grade:	
В	irthday:	//_	Age:	Gender:	
Racial Classification (circ	cle all that a _l	oply): White	African American	American Indian	Asian Pacific-Islander
Residence <i>(circle one)</i> :	Farm				City (more than 50,000)
Circle any that apply:	Hispanic	ethnicity	Military family		
Home Phone:		I	Family Email:		
Parent or Guardian Information:			Mobile Phone:		Work Phone:
Primary:					
Secondary:					

Health concerns, allergies, dietary or special needs: ____

THIS ENROLLMENT FORM IS GOOD FOR ALL FAYETTE COUNTY 4-H

YOUTH DEVELOPMENT ACTIVITIES AND EVENTS FOR THE PERIOD OF:

August 1st – July 31st of the program year listed above.



