Is this	your	first	year	in	4-H?	Yes	No
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School:	Grade:	Homeroom Teacher:			
Last Name:	F	rst Name:			
Address:	City:		Zip:		
Date of Birth: Circle	one: MALE	FEMALE	Shirt Size:		
Racial Classification: (circle all that apply) Wh	ite African-Ameri	can/Black America	n Indian Asian Pacific-Island	ler	
Residence: Farm Rural (Flintstone, R	ising Fawn, Rock Spring, Rock	Face, Lkt Mtn, Trion)	OWN (Chickamauga, LaFayette, Rossville, Sun	nmerville,	
Family member in your home currently Active Milita	ry? Yes No	Ethnicity:	Hispanic Non-Hispa	nic	
Telephone Numbers: <u>(</u>))			
eMail:	Si	gn up for electronic n	nonthly 4-H newsletter? Yes N	10	
Parent/Guardian Name:Parent/Guardian Name:					
2024-2025 Walker County 4-H Er School:			is your first year in 4-H? Yes I		
Last Name:		First Name:			
Address:	City:		Zip:		
Date of Birth: Circle	e one: MALE	FEMALE	Shirt Size:		
Racial Classification: (circle all that apply) W	hite African-Ame	ican/Black Americ	can Indian Asian Pacific-Islan	der	
Residence: Farm Rural (Flintstone,	Rising Fawn, Rock Spring, Roc	ky Face, Lkt Mtn, Trion)	Town (Chickamauga, LaFayette, Rossville, St	ımmervili	
Family member in your home currently Active Milit	ary? Yes No	Ethnicity:	Hispanic Non-Hisp	anic	
Telephone Numbers: <u>(</u>)	<u> </u>)			
eMail:		ign up for electronic	monthly 4-H newsletter? Yes	No	
Parent/Guardian Name:		Parent eMail:			
Parent/Guardian Name:		Daront aMail:			