To enroll in the Monroe County 4-H Program, complete this form and send to: Monroe County Cornell Cooperative Extension, 2449 St. Paul Blvd, Rochester, NY 14617

Please Fill Out This Form Completely!

Personal Information: Last Name	First Name	M.I
Address		
Home Phone ()		
Occupation	Work Phone ()	
Email Address 4-H often sends information electronically; please list	County of Residence:	
4-H often sends information electronically; please list We will not share your emai	tyour preferred address for receiving 4-H annou I information with any other party or agency.	incements and updates
Date of Birth # of ye	ears in 4-H (including this year)	
ENROLLMENT INFORMATION:		
I belong to the	4-H Club. Give name of	club, if applicable
Describe your residence:	Ethnicity (statistical purp	oses only):
□Farm/Rural (population under 10,000)	☐ Hispanic ☐	
Town/Village (population 10,000-50,000)	Race (statistical purposes	only):
□Town/Suburb (population over 50,000) □City (population over 50,000) APPLICANT PROFILE: What interests do you wish to pursue or what volunteer? (Please attach additional page if the pursue of the		□ Pacific/Hawaiia
□City (population over 50,000) APPLICANT PROFILE: What interests do you wish to pursue or what volunteer? (Please attach additional page if the pursue of	□ Native American □ t do you hope to accomplish by se	□ Pacific/Hawaiia
□City (population over 50,000) APPLICANT PROFILE: What interests do you wish to pursue or what volunteer? (Please attach additional page if the pursue of	□ Native American t do you hope to accomplish by seneeded!) have experience:	□ Pacific/Hawaiia:
□City (population over 50,000) APPLICANT PROFILE: What interests do you wish to pursue or what volunteer? (Please attach additional page if the pursue of the pursue or what volunteer? (Please attach additional page if the pursue or what volunteer?)	□ Native American t do you hope to accomplish by seneeded!) have experience: ural Resources □ Horticulture □	□ Pacific/Hawaiia:
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□City (population over 50,000) APPLICANT PROFILE: What interests do you wish to pursue or what volunteer? (Please attach additional page if the pursue of the pursue or what volunteer? (Please attach additional page if the pursue or what volunteer?)	□ Native American t do you hope to accomplish by seneeded!) have experience: ural Resources □ Horticulture □ □□ Other □□	□ Pacific/Hawaiia:
□City (population over 50,000) APPLICANT PROFILE: What interests do you wish to pursue or what volunteer? (Please attach additional page if the property of	□ Native American t do you hope to accomplish by seneeded!) have experience: ural Resources □ Horticulture □ □□ Other □□	□ Pacific/Hawaiia:
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□City (population over 50,000) APPLICANT PROFILE: What interests do you wish to pursue or what volunteer? (Please attach additional page if the property of	□ Native American t do you hope to accomplish by seneeded!) have experience: □ A have experience: □ Other □ Other □ Commit to volunteering? Long Term: □ 6-12 months □ 1-3 hours □ 3-6 hours □	□ Pacific/Hawaiia: rving as a 4-H □ Agriculture □ over a year □ more than 6 hour
□City (population over 50,000) APPLICANT PROFILE: What interests do you wish to pursue or what volunteer? (Please attach additional page if pursue or what volunteer? (Please attach ad	□ Native American t do you hope to accomplish by seneeded!) have experience: □ A have experience: □ Other □ Other □ Commit to volunteering? Long Term: □ 6-12 months □ 1-3 hours □ 3-6 hours □	□ Pacific/Hawaiia: rving as a 4-H □ Agriculture □ over a year □ more than 6 hour ies:

Voluntee	r <u>History:</u> Please	ist other volunteer involvement that you have previously had or are currently involved with?
Reference	es: List two person	s not related to you who have definite knowledge of your qualifications and can attest to your
	Complete addresses	
1		
1.	Name	Email:
1.		Email:
1.	Address	
2.	AddressPhone	Relationship to this person
	AddressPhoneName	Relationship to this personEmail:
	Address Phone Name Address	Relationship to this person
	Address Phone Name Address	Relationship to this personEmail:
2. I authorize co	Address Phone Address Phone ntact of listed references	Relationship to this personEmail: