

4-H CLUB REGISTRATION

Due January 31st

4-H Club Name: _____

Town most closely identified with club: _____

Club Advisors: Use additional sheet(s) if necessary

Please * the volunteer(s) you would like to have access to the club's 4-H Online account.

Organizational Advisor(s)	Returning Advisor(s)	New Advisor(s)

How many club members do you anticipate? _____

Will your club accept new members? YES/NO _____ How many? _____

Will your club conduct the Clover Bud Program? YES/NO _____

What type of projects does your club have? _____

Meeting Dates***:

Meeting Locations:

February _____

February _____

March _____

March _____

April _____

April _____

*****Complete list of current year meeting dates/locations due by April 1.**

