

WASHINGTON 4-H ENROLLMENT FORM

(Office Use Only)

County Code: 0
(0+2-digit-WA county number)

Group Code:
(3-digit club/group number)

Member Code:
(5-digit unique member/leader ID#)

(Leader fills in this section)

DATE: _____ GEN/ORG. LEADER: _____ PHONE: () _____

CLUB NAME: _____ MAILING ADDRESS: _____

Circle one: 1-Community Club 2-Sch. Club 3-After-Sch. Club 4-Military Club 5-Spec. Int./Short-Term
6-Overnight Camp 7-Day Camp 8-Sch. Enrichment 9-Individual/Fam. 4-H 10-Sch. Age Care

PLEASE PRINT

Circle one: M-Member G-General/Org. Ldr. P-Project Ldr. A-Activity Ldr. R-Resource Ldr.

Circle one: N-New Enrollment R-Re-enrollment D-Drop from Club Ch-Change/Add Information

Youth Leader **Circle one or more:** Indirect Volunteer Direct Volunteer Middle Manager
(Members Only) (Youth Leaders or Adult Leaders Only)

Last Name: _____ **First Name:** _____ **MI:** _____

Mailing Address: _____

Zip + 4: - **City:** _____ **State:** _____

School (Opt.): _____ **Yr. in 4-H:** _____ **Birthday:** ____ / ____ / ____ **Gender:** M F

Grade: _____ (Yth. only) **Disabled:** **Disability:** _____ **Accommodation Needed?** Yes No

Residence: Farm Rural Urban Suburb Central City E-mail _____
(Under 10,000) (Under 50,000) (Over 50,000) (Over 50,000)

Ethnic: Hispanic Not Hispanic

Race: (Check all that apply) White Black Alaskan/Am.Indian Asian Hawaiian/Pac.Isl. Other

PROJECT CODE	PROJECT NAME	PROJECT YEAR
Example: FHB	Just Outside the Door	1
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Parent/Guardian: _____ **Signature:** _____

Home Ph: - **Work:** -

Family E-mail _____

Leader Signature: _____ **Date:** _____

Image and Voice Recordings Consent

Participant _____ and his/her parent or guardian, hereby grant permission to Washington State University (WSU) to be photographed or otherwise have images or voice recordings made (including but not limited to digital photographs, video or digital moving images, and/or voice recordings), for WSU publication or promotional purposes in any medium (including but not limited to print media, newspaper, television, video, motion picture, or Web site on the Internet)

I additionally consent to the use of the student participant's name and/or interview comments in connection with WSU publication or promotional purposes in print media, newspaper, television, video, motion picture, or Web site on the Internet.

We understand that consent to use of the student participant's likeness or voice recordings is not a condition of participating in the activity and that consent can be refused without any impact in the ability to fully participate in the program.

No inducements or promises beyond our acceptance of an opportunity to promote WSU and its programs have been given to the persons signing below.

Any other use of images and/or recordings, my name, and/or interview comments requires advance permission.

We understand that we can revoke this consent at any time upon notice to WSU, at which time either, or both of us will sign a copy of the denial (below) for use of images or voice recordings.

We agree to use of digital images or voice recordings as set forth above:

Signature of Parent/Guardian (for participant less than 18 years of age) Date _____

Signature of Participant Date _____

We do not agree to use of digital images or voice recordings as set forth above:

Signature of Parent/Guardian (for participant less than 18 years of age) Date _____

Signature of Participant Date _____