



**Participant Application**  
**Citizen Washington Focus (CWF)**  
**National 4-H Trip**



**Application Process:** Complete and submit the following to your Berrien County MSU Extension Office

**Please fill out completely. Print or type.**

Full Name \_\_\_\_\_

Name as you would like it to appear on your nametag:

\_\_\_\_\_

County \_\_\_\_\_

Gender (circle): M F                      Grade in School \_\_\_\_\_

Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_      Age by 01/01/09 \_\_\_\_\_

Number of years in 4-H (including current year) \_\_\_\_\_

T-Shirt/Polo Shirt Size: S M L XL XXL

Home Phone (\_\_\_\_) \_\_\_\_\_      Email address \_\_\_\_\_

Mailing address \_\_\_\_\_

City \_\_\_\_\_      State \_\_\_\_\_      Zip Code \_\_\_\_\_

Racial/Ethnic Category (for Affirmative Action purposes only):

\_\_\_\_ African American                      \_\_\_\_ Caucasian/White                      \_\_\_\_ Native American

\_\_\_\_ Arabic                      \_\_\_\_ Chicano/Hispanic/Latino                      \_\_\_\_ Mixed Heritage

\_\_\_\_ Asian/Pacific Islander

Name and relationship of Emergency Contact Person(s) \_\_\_\_\_

Daytime Ph. # (\_\_\_\_) \_\_\_\_\_      Evening Ph. # (\_\_\_\_) \_\_\_\_\_      Cell Ph. # (\_\_\_\_) \_\_\_\_\_

Place a **4-H appropriate**  
“head and shoulder” shot  
photograph here. This is used  
for identification by  
staff and chaperones.

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Why do you want to participate in 4-H National Congress, and what do you hope to learn?

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List **4-H** programs/events/workshops you've participated in at the county, regional or state level (i.e., 4-H camp, 4-H Exploration Days, state level animal project contests/shows, state level workshops held at Kettunen Center, etc).

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List **4-H** leadership activities you've been involved with (i.e., club officer, teen leadership project, camp counselor, service on a club, county or state level committee, etc.)

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List **4-H** community service projects you've been involved with where you helped others in need in your community.

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List **any other** community service projects you've been involved with (i.e. through church, school, another organization, etc.)

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List other travel experiences \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special Status:    \_\_\_ Wheelchair User    \_\_\_ Disability (specify \_\_\_\_\_)

Other special needs \_\_\_\_\_

**I certify that all information on this application is true and complete to the best of my knowledge:**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**We recommend this member to represent Michigan 4-H at this national event:**

County 4-H Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return completed application forms by December 10, 2018 to:**

**Kelly Stelter**  
**4-H Program Coordinator**  
**[grandtke@msu.edu](mailto:grandtke@msu.edu)**  
**Berrien County MSU Extension**  
**1737 Hillandale Road**  
**Benton Harbor, MI 49022-9630**