



**Participant Application
National 4-H Congress
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 _____

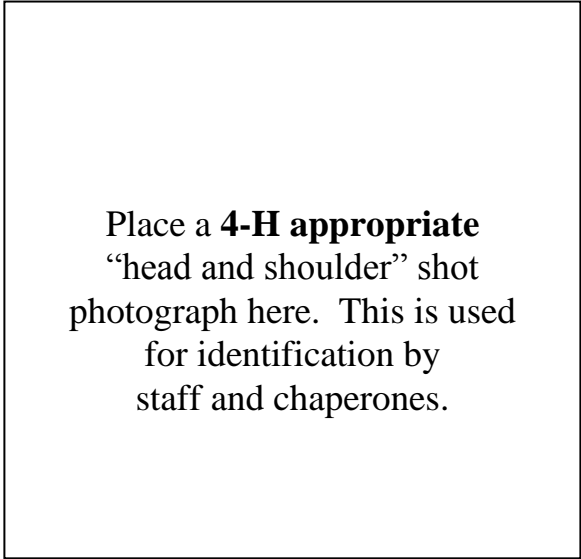
City _____ State _____ Zip Code _____

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

- | | | |
|---|--|--|
| <input type="checkbox"/> African American | <input type="checkbox"/> Caucasian/White | <input type="checkbox"/> Native American |
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Chicano/Hispanic/Latino | <input type="checkbox"/> Mixed Heritage |
| <input type="checkbox"/> Asian/Pacific Islander | | |

Name and relationship of Emergency Contact Person(s) _____

Daytime Ph. # (____) _____ Evening Ph. # (____) _____ Cell Ph. # (____) _____



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).

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.)

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

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

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
Berrien County MSU Extension
1737 Hillandale Road
Benton Harbor, MI 49022-9630