4-H Participation Fee Scholarship Request

۱ , ,	would like to request a Clare County 4-H Pa	ticipation Fee Scholarship
for my child (children) for the 201		·
Primary Club:		
Secondary Club if applicable:		
Short term program in applicable:	:	
Youth Name(s):		
Sincerely,		
Sign		
Date		
Primary Club Leader's Signature: _		86
Office Use Only. Date MSU Extens	sion received:	