

4-H Participation Fee Scholarship Request

I, _____, would like to request a Clare County 4-H Participation Fee Scholarship from the Clare County 4-H Council for my child or children for the 2019-2020 program year which runs from September 1 to August 31.

Primary Club: _____

Secondary Club if applicable: _____

Short term program in applicable: _____

Youth Name(s):

Sincerely,

Sign

Date

Primary Club Leader's Signature: _____

Office Use Only. Date MSU Extension received: _____

