

Osceola County Kettunen Center Prepay Form

Name: _____

Event: _____

Place: _____

Date(s): _____

Name of 4-H Club: _____

_____ 4-H Youth _____ 4-H Leader _____ Chaperone

Expenses:

Registration Fee (etc.): _____

Pre-pay amount request: _____

Funds already raised: _____

Criteria for Osceola County Kettunen Center Prepay

4-H Leaders/Members will:

1. Will **submit prior** to registering to the Kettunen Center Workshop.
2. Will submit **Osceola County Scholarship Request Form** along with prepay form.
3. If participant already paid using credit/debit card, they will need to fill out the first and third line.
4. Understand that Osceola County 4-H Council will only pay up to original registration fee and nothing over.
5. **If participant is a no show or cancels after deadline, participant will reimburse Osceola County 4-H Council 100%.**
6. **In the case of participant does not reimburse Osceola County 4-H Council**
 - a. **Will no longer be able to attend any workshops that relates to 4-H until debt is paid**
 - b. **Will receive breach of code of conduct letter**
 - c. **After conclusion of 4-H calendar year, participant may not re-enroll with Osceola County 4-H. (This will be carefully monitored).**

The Osceola County 4-H Council considers each application carefully, but reserves the right to reject, limit, or divide money between applicants. The Council also reserves the right to make exceptions to these guidelines.

I agree to the terms above set forth by the Osceola County 4-H Council.

Signature of applicant

Signature of parent/guardian of applicant
if under 18 years of age

Office Use Only

Date Received: _____

Received By: _____