



2012 "Garrett County" 4-H MEMBER ENROLLMENT

Full Name (Last, First, MI): _____

Parent/Guardian Name (Last, First, MI): _____

Birth Date: ___/___/___ Email: _____

Email Newsletter Wants 4-H Mailings Photo/Media Release

Primary Phone: () _____ Mobile Phone () _____

Other Phone: () _____ Wireless Provider: _____

Work Phone: () _____ Time to Call: _____

Mailing Address: _____

City: _____ State: ___ Zip: _____ County of 4-H participation: _____

Has health considerations Health consideration: _____

Military Family: (Check applicable box)

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Active Army | <input type="checkbox"/> Army Guard | <input type="checkbox"/> Army Reserve | <input type="checkbox"/> Active Air Force |
| <input type="checkbox"/> Air Guard | <input type="checkbox"/> Air Force Reserve | <input type="checkbox"/> Active Navy | <input type="checkbox"/> Naval Reserve |
| <input type="checkbox"/> Active Marine Corps | <input type="checkbox"/> Marine Corps Reserve | <input type="checkbox"/> Active Coast Guard | <input type="checkbox"/> Coast Guard Reserve |

Please provide us with this optional data so that we may report to our Federal partners

Racial Groups: (check all that apply):

- | | | |
|--|--|--|
| <input type="checkbox"/> White | <input type="checkbox"/> Black or African American | <input type="checkbox"/> American Indian or Alaskan Native |
| <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> Asian | |

Hispanic Ethnicity: (check one):

- Yes – Hispanic or Latino Ethnicity OR No -- Not Hispanic or Latino Ethnicity

Residence (Check one):

- Farm Rural/Town less than 10,000 Town/City 10,000 to 50,000 Suburb City over 50,000

Mark 4-H Projects you are taking on the back of this form.

Name of Primary 4-H Club 1: _____ Club 2: _____

I give permission to the College of Agriculture and Natural Resources, University of Maryland, to use and publish my video or photographic image for educational and promotional purposes without compensation.

_____ Participant Signature	_____ Date	_____ Parent/Guardian Signature	_____ Date	_____ 4-H Leader Signature	_____ Date
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