

Please return in this form by April 1st.
This information is used for the *4-H Is For You* brochure.

Licking County 4-H Club Information Sheet

Club Name: _____

Organizational Advisor: _____

Phone Number #: _____

Email Address: _____

(This information will be published in brochures or media sources to promote community 4-H clubs and will be released to those youth seeking to join a 4-H Club.)

General area of county that club serves:

Project areas to publicize: (please circle all that apply)

Dog

Shooting Sports (w/certified instructor)

Food | Clothing

Special Interest

Horse

Tractor Certification (w/certified instructor)

Livestock

Cloverbuds (see below)

Poultry | Rabbit

Cloverbud Advisor(s) (must be approved club advisor)

Name(s): _____

Phone Number #: _____

Attach club meeting schedule, if available