

Member Information:

FOR OFFICE USE ONLY: Country Code:	Club Code:	Member Code:	

Last Name		First Name	
Preferred Name		Date of Birth (Youth Only)	
Email		Primary Phone	()
Cell Phone		Work Phone	
Mailing Address		Mailing Address 2	
City		County (of residence)	
State		Zip	
Township		M.I	
Receive Email Newsletters	🗆 Yes 🗆 No	Gender	🗆 Male 🗆 Female
-			

"I consent to receiving texts from CCE" My Cell Carrier is: _____My cell phone number is: _____

Parent/Guardian 1 Information:

FOR OFFICE USE ONLY: Family ID: _____

Last Name		First Name	
M.I		Preferred Name	
Mobile Phone		Work Phone	
Mailing Address 1		Mailing Address 2	
City		County (of residence)	
State		Zip	
Occupation		Email	
Legal Guardian	🗆 Yes 🗆 No	Receive Email Newsletters	🗆 Yes 🗆 No

"I consent to receiving texts from CCE" My Cell Carrier is: _____My cell phone number is: _____

Parent/Guardian 2 Information:

FOR OFFICE USE ONLY: Family ID: _____

Last Name		First Name	
M.I		Preferred Name	
Mobile Phone		Work Phone	
Mailing Address 1		Mailing Address 2	
City		County (of residence)	
State		Zip	
Occupation		Email	
Legal Guardian	🗆 Yes 🗆 No	Receive Email Newsletters	🗆 Yes 🗆 No

"I consent to receiving texts from CCE" My Cell Carrier is: _____My cell phone number is: _____

ES 237 Demographics:

Ethnicity	Are you of Hispanic ethnicity?	□ No
Race	□ White	Native Hawaiian or Pacific Islander
	Black	Asian
	American Indian or Alaskan Native	Prefer Not to State
Residence	Farm(Rural area where agricultural	Suburb of city more than 50,000



Image: Town under 10,000 & rural non-farm Image: Town /City 10,000-50,000 & suburbs Military Image: No one in my family is serving in the image: Im	- L	products are sold)	Control situ more than 50,000	
Image: Second			□ Central city more than 50,000	
Military No one in my family is serving in the military I have a parent serving in the military Branch Air force army coast Guard DOD Civilian Marines Navy Component Air force Army Coast Guard DOD Civilian Marines Navy Grade School Name School Type Public School (Youth Only) Private School Broilment Information: Special Education Enrollment Category Member Date Enrolled: 4-H age: Yes No Is this individual a Youth Yes Volunteer? New Is Youth member a club Officer? Ordina Focus: Prive Club Clubs Enroll (New Club): (New Club): (New Project): (New Project): (New Project): (New Project):		,		
and on military and on military and on military Branch Air force army active and active positions Active Duty and active arms Grade School Name school Name School Type Public School Homeschool/Alternative (Youth Only) Private School Magnet/ Specialized School Enrollment Information: New acturning/ Re-Enrollment and active are innated and and active are innated and active are innated and and active are innated are innate	Ailitary			
Branch Component I have a sibling serving in the military Branch Component Air force a Army a Coast Guard bod Civilian Marines Navy active Duty National Guard Reserves Grade School Type (Youth Only) Public School Homeschool/Alternative Private School Magnet/ Specialized School Branch (Youth Only) Private School Magnet/ Specialized School Enrollment Information: New Returning/ Re-Enrollment Inactive Terminated Alumn Date Enrolled: 4-H age: Enrollment Category Member Cloverbud/Mini member Date Enrolled: 4-H age: Is this individual a Youth Volunteer? Yes No Payment method: Cash Check #: Is Youth member a club officer? Medical Release Acknowledgement of Risk Code of Conduct Free Educational Focus: Clubs Enroll (New Club): (New Club): (New Club): Projects Enroll (New Project): (New Project): (New Project): (New Project): (New Project): (New Project): (New Project):	nincar y			
Branch Component Air force army coast Guard DOD Civilian Marines Navy Active Duty National Guard Reserves Grade School Type Public School Homeschool/Alternative Private School Magnet/ Specialized School Special Education Derivate School Special Education Charter School Enrollment Information: Member Cloverbud/Mini member Date Enrolled: 4-H age: Years In 4-H: Enrollment Fee Paid : Yes No Payment method: Cash Check # Is this individual a Youth Yes No Club Officer position: Status Strong Tormer Submitted Medical Release Acknowledgement of Risk Code of Conduct Fre Educational Focus: Enroll (New Club): (New Club): (New Club): Projects Enroll (New Project): (New Project): (New Project): (New Project): (New Project): (New Project): (New Project): (New Project):			•	
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Grade				
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(Youth Only) Private School Magnet/ Specialized School Private School Magnet/ Specialized School Special Education Charter School Enrollment Information: Member Status New Renollment Category Member Date Enrolled: 4-H age: Vears In 4-H: Paid : Pears In 4-H: Enrollment Fee Paid : Pears In 0 (if applicable) Check #: Is this individual a Youth Yes In No Volunteer? Yes In No Is Youth member a club Yes In No Officer? Private School Forms Submitted Medical Release In Acknowledgement of Risk In Code of Conduct From Submitted Clubs Enroll (New Club): (New Club): (New Club): (New Club): (New Project): (New Project): (New Project): (New Project): (New Project): (New Project): (New Project): (New Project):				
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(if applicable) Check #:	Inrollment Fee			
Is this individual a Youth <pre> Yes □ No</pre>	if applicable)			
Volunteer? Is Youth member a club officer? Forms Submitted Image: Medical Release Image: Acknowledgement of Risk Image: Clubs Image: Clubs:	s this individual a Youth			
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Certifications	ertifications			

Parent/ Guardian Signature: ______ Date: ______