Ohio 4-H Volunteer Enrollment Form

4-H Club ____________________________ New volunteer ❑ Re-enrollment ❑

E-mail Address ____________________________________________________________ Years as Volunteer (Including this year) _______

Name (please print) _________________________________________________________

First Middle Initial Last

Mailing Address _____________________________________________________________ County of Residence _______________________

Street City Zip

Birth Date ___/___/____ Gender ❑ Male ❑ Female Primary Phone ______-____-____ Cell Phone ______-____-____

❑ Check here to receive text alerts to your mobile device. Mobile Service Provider ____________________________

(There is no fee for this service. However, standard text message rates may apply. Please contact your mobile service provider for more details.)

Correspondence Preference ❑ E-mail ❑ Mail T-Shirt Size _______ ❑ Youth ❑ Adult

Occupation (optional) __________________________ Level of Education (optional) _______________________

Ethnicity (check one) ❑ Hispanic ❑ Not Hispanic ❑ American Indian/Alaskan ❑ Hawaiian/Pacific Islander ❑ Asian

Race (check all that apply) ❑ White ❑ Black ❑ (Less than 10,000) ❑ Suburb (More than 50,000)

Residence (check one) ❑ Farm ❑ Town (Less than 10,000) ❑ Town (10,000 to 50,000) ❑ City (More than 50,000)

Active Military Service (check all that apply) ❑ I and/or my spouse/partner ❑ My parent(s) ❑ I have a sibling(s) ❑ I have a dependent(s)

Branch of Service ❑ Air Force ❑ Army ❑ Coast Guard ❑ Marines ❑ Navy

Branch Component ❑ Active Duty ❑ National Guard ❑ Reserves

Health Considerations/Notes (i.e. food allergy, diabetes, etc.….) ____________________________________________________________

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Volunteer Type (check one) ❑ Organizational Club Leader ❑ Cloverbud Leader ❑ Project Leader ❑ Resource Leader

Projects/topics in which I provide leadership ____________________________________________

I also serve as a county volunteer for (list any other county clubs, committees, and/or organizations) ______________________________________

I am a previous 4-H member ❑ Yes ❑ No – If yes, County and State ____________________________________________

❑ I have read, understand, and agree to be bound by the VOLUNTEER STANDARDS OF BEHAVIOR outlined on the back of this form.

Volunteer Signature __________________________ Date __________ Organizational Club Leader Signature __________________________ Date __________