



Lincoln-Adams
Enrollment for
FAMILY 4-H PROGRAM

Return to:
WSU Extension
210 W Broadway, Suite 104, Ritzville, WA 99169
Voice 659-3209, FAX 659-3303, e-mail robertk@wsu.edu

PLEASE PRINT

Name of Group: _____ **Family 4-H** Date: _____

Parent(s) teaching project study

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Day Phone(s): _____ Evening Phone(s): _____

E-mail: _____

PROJECT(S) or ACTIVITIES you are supervising/teaching your child(ren):

Check to receive EM2778 "4-H Publications and Projects – 2009-2010 Catalog"
(If you did not receive direct from WSU.)

Check to receive CD2778 "4-H Publications and Projects – 2009-2010 CD"

Please **Also Return** Individual Lincoln-Adams 4-H Member Enrollment or Re-enrollment Form(s) for youth
AND Volunteer Application and/or Volunteer Agreement Form for adult(s)

Name(s) of youth involved in 4-H through your Family 4-H Group this year

Note: