

# APPLICATION FOR FINANCIAL ASSISTANCE FOR WA STATE 4-H ENROLLMENT FEE

Member Name: \_\_\_\_\_ Age: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

Club Name: \_\_\_\_\_

Indicate below which options your family will commit to contributing toward the total state enrollment fee for the year.

\_\_\_\_\_ Our family will provide a partial contribution of \$\_\_\_\_\_

\_\_\_\_\_ Our family will participate in Club Fundraising Events

\_\_\_\_\_ Our family will participate in the following County-Wide Fundraising Events

\_\_\_\_\_ "Celebrate Our Kids" Recognition Dinner (October-November)

\_\_\_\_\_ Tractor Supply Company "Paper Clover Campaign" (October & May)

\_\_\_\_\_ Cowboy Breakfast (August, During Fair)

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Return the completed application to the 4-H Office:

**WSU Extension, Grays Harbor County**

**PO Box 3018**

**Elma, WA 98541**

[tracie.hanson@wsu.edu](mailto:tracie.hanson@wsu.edu)

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