



Lancaster County 4-H Volunteer Enrollment Form



Office Use Only	10/2003
Leader ID# _____	
Completed Volunteer Screening	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Primary Club: _____

Last Name: _____ First Name: _____ M.I. _____

Address: _____ City: _____ Zip: _____

Phone Number: _____ Alt. Phone: _____ Check One: Male Female

Years as Leader (include this year): _____

Leader Type: Organizational Project Other _____

Email: _____

<p>Ethnicity: (check one)</p> <p><input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino</p>	<p>Race: (check all that apply)</p> <p><input type="checkbox"/> White <input type="checkbox"/> African American <input type="checkbox"/> American Indian/Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p>	<p>Residence: (check one)</p> <p><input type="checkbox"/> Farm/Ranch <input type="checkbox"/> Town less than 10,000 & Rural Non-farm <input type="checkbox"/> City over 50,000</p>
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Please list any disabilities that we need to be aware of: _____

List Projects that you help with as a volunteer (if any):

Proj. Code	Project Name	Proj. Code	Project Name
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I give permission to use my name/photograph in publications, advertisements, news articles or Web sites pertaining to 4-H activities.

Check One: Yes No

This 4-H Club/Group that I am a leader of abides by the nondiscrimination policies of the University of Nebraska-Lincoln and the United States Department of Agriculture. The 4-H Club/Group requests authorization to use the 4-H name and emblem.

Signature: _____ Date: _____