



County/City _____
 Name of 4-H Club or Group _____
 Leader/Teacher _____
 Community or School _____

Delivery Method of Event _____
 EFNEP ___ yes ___ no SCNEP ___ yes ___ no
 Racially mixed community ___ yes ___ no
 Was event integrated ___ yes ___ no

						SEE CODING INSTRUCTIONS ON BACK FOR THIS SECTION.														
Name			Mailing Address	City or Town	Zip	YEARS IN 4-H	GENDER	RESIDENCE	ETHNICITY	RACE	BIRTHDAY			GRADE	4-H PROJECTS/ SUBJECTS	TEEN LEADER	LEADER TYPE	LEADER ASSN.		
Last	First	Middle									MONTH	DAY	YEAR							
1. LEADERS																				1.
2.																				2.
3.																				3.
1. MEMBERS																				1.
2.																				2.
3.																				3.
4.																				4.
5.																				5.
6.																				6.
7.																				7.
8.																				8.
9.																				9.
10.																				10.
11.																				11.
12.																				12.
13.																				13.
14.																				14.
15.																				15.
16.																				16.
17.																				17.
18.																				18.
19.																				19.
20.																				20.

4-H Group Enrollment Instructions

This 4-H Enrollment form may be used to capture the names and statistical information for 4-H members who do not complete a 4-H enrollment form. It is especially designed for School Enrichment groups, after school groups, short-term workshops, day camp, etc. Adults should gather the information from youth participants. Virginia Cooperative Extension requests this information for purposes of evaluation and accountability. If this form will not hold all the names of adults and members, continue on another sheet. The information on this sheet should be summarized on form 388-005 "4-H Group Enrollment Summary" for reporting purposes.

Delivery Method

- ___ 100 Organized Club/Project club
- ___ 110 In-school Club
- ___ 120 After-school Club
- ___ 130 Club on Military Base
- ___ 200 Special-interest/Short-term
- ___ 300 Overnight Camp
- ___ 310 Day Camp
- ___ 400 School Enrichment
- ___ 500 Individual Member
- ___ 600 After-school Care
- ___ 700 Instructional TV or Video Program
- ___ 900 Group Volunteer Training Only

EFNEP or SCNEP specially funded programs

Indicate yes if applicable

Racially Mixed Community

Indicate Yes or No

Was Event Integrated?

Indicate Yes or No

Years in 4-H

Years counting this year for participating in 4-H

Gender

- Female
- Male

Residence Code

1. farm
2. towns under 10,000 and rural nonfarm
3. towns and cities of 10,000 to 50,000
4. suburbs of cities over 50,000
5. cities over 50,000

Ethnicity

1. Hispanic/Latino
2. Not Hispanic/Latino

Race

(indicate all that apply. If no race is indicated, adult is to make best estimates.)

1. American Indian/Alaskan Native
2. Asian
3. Black/African American
4. Native Hawaiian/Other Pacific Islander
5. White

Birthday

Month/Day/Year mm/dd/yy

Grade

Current grade in school

Projects

Use project ID Codes listed on Project Supplement from your local Extension Office

Teen Leader

Leave blank unless acting in teen leader role.
(Code 48 = teen leader)

Leader Type

(select the following code that best describes the role of the leader)

- 41 Organization
- 42 Project
- 43 Activity
- 44 Helper
- 45 Master volunteer
- 46 Collaborator
- 47 Occasional
- 48 Indirect (does not work with youth)

Leaders Association

Adult volunteer leaders/teachers wishing to be members of the Virginia Association of Adult Volunteer Leaders should check the box to receive a copy of the Association by-laws.

AGREEMENT:

4-H volunteer agreement should be signed by all 4-H volunteers.

I am volunteering my time to further the educational purposes of 4-H and will actively work toward achieving race and gender balance. I will not discriminate on the basis of race, color, creed, religion, gender, national origin, handicap, or political affiliation

1. _____
Date _____
2. _____
Date _____
3. _____
Date _____