

4-H Name and Emblem Request

4-H Center for Youth Development

4-H Name and Emblem Request must accompany enrollment forms from each club/unit to MU Extension center.
Club leaders must fill out a new form each year.

THIS SECTION TO BE COMPLETED BY 4-H VOLUNTEER

To (4-H youth specialist) _____ Club/Unit Code _____

County _____ County Code _____

Youth and Volunteer enrollment forms are enclosed for:

Name of Club/Unit _____ EIN # _____

I certify that the 4-H club/unit does not exclude, restrict, nor deny any person membership or participation in its programs or activities because of race, color, national origin, religion, sex, age, disability or status as a Vietnam era veteran.

If the club/unit was organized for the first time in the last 24 months, give the date the club/unit was organized

_____ The regular meeting day and time of our club/unit is _____.

I acknowledge that in my volunteer service for Missouri 4-H Youth Development Programs, I will have access to confidential information contained in the volunteer applications and/or records of volunteers serving the organization. I agree that I shall not disclose any such information to any unauthorized person, and I will adhere to confidentiality guidelines of the Missouri 4-H Youth Development Programs. I further acknowledge that a proven breach of confidence could be a cause for termination from my volunteer position.

Furthermore, I agree that the above named 4-H club/unit will follow all financial guidelines for 4-H groups outlined in the Missouri 4-H Treasurer Record Book.

With these affirmations, I hereby request permission for our club/unit to use the 4-H name and emblem in conducting educational programs, and that we be granted tax-exempt status as provided in Section 501(c)(3) of the 1954 IRS Code.

Date _____

Signature of Club/Unit Leader _____

State 4-H Enrollment Fees

Indicate the Type of 4-H Club/Unit

- Community, single project or family 4-H club
- Individual or independent 4-H club member
- 4-H Clover Kid Club
- Other 4-H club/unit

Number of Members _____

For each member, an \$8.00 state 4-H enrollment fee is required. \$ _____
(Check with your county 4-H staff for details on payment.)

THIS SECTION (1 & 2) TO BE COMPLETED BY 4-H STAFF

County _____ County Code _____

SECTION 1

Check One of the Following

- Community is an interracial community and the group is integrated.
- Community is an interracial community, but the group is not integrated.
(Add information in Section 2 below.)
- Community is not an interracial community as defined in the county Affirmation Action plan.

I have informed this club/unit leader of confidentiality and affirmative action requirements for Missouri 4-H Youth Development Programs. This club/unit is authorized to use the 4-H name and emblem in keeping with federal guidelines and is granted tax-exempt status for the _____ program year.

Signature of 4-H Youth Specialist _____

Date _____

SECTION 2.

Indicate the efforts that have been made to achieve an integrated club/unit.

The County University of Missouri Extension Center keeps the original and sends copies to the regional director and 4-H club/unit to comply with affirmative action regulations.



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