Date	
Club Name:	
Project Areas:	
Location of Meetings:	
Time and Days of club meetings:	
Club Meets? ☐ Weekly ☐ Bi-Weekly	□ Monthly □ Other:
Is the club accepting new members? \square Yes	□ No
CLUB CONTACT (must be an enrolled 4-H volunte	eer)
Name	
Address	
Cell Phone	Home Phone
E-mail	
☐ Ok to distribute contact information to the public	, , ,
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Current Club Roster

Please list all members currently participating in your club. It is the responsibility of the Club Leader to inform Lincoln County Extension of any new members as they are added to the roster.

Member's Full Name (First and Last)