



4-H Youth Group Enrollment Form



Circle One

School Enrichment

Special Interest (>3 Days)

Day Camp (1-3 Days)

Overnight Camp

YFP / Mentoring

Name of Program: _____

Date: _____

Location: _____

Act/Proj Code (opt.): _____

Presenter: _____

Total Contact Hours: _____

Number of hours youth were involved in Educational Experience: _____

Has this group been reached with a 4-H/Extension program earlier this year? _____

If yes, what? _____

How many participants?			How many of this group are 4-H members?		
Males	Females	Total (A)	Males	Females	Total (B)

Subtract Total B from Total A (This # should be used for remainder of this form.) _____

Where do the participants live?	Farm	Rural	Town 10K – 50K	Suburb	City 50K+

Grade(s)	K	1	2	3	4	5	6	7	8	9	10	11	12

Please estimate the ethnic and racial distribution of the participants.

Ethnicity:	Hispanic	Non-Hispanic

Race:	Hispanic	Non-Hispanic
White		White
Black		Black
American Native		American Native
Asian		Asian
Hawaiian/Pac. Island		Hawaiian/Pac. Island
White & Black		White & Black
White & Am. Native		White & Am. Native
Black & Am. Native		Black & Am. Native
White & Asian		White & Asian
Other/Mixed (specify)		Other/Mixed (specify)

(The race categories MUST add up to the totals report above for ethnicity.)