

Application for Funding Bourbon County 4-H Development Fund

Name _____ Current Age _____
 Address _____
 Club _____ Years in 4-H _____
 Name of Parent/Guardian _____ Phone _____
 Activity for requested funds _____ Total Cost _____
 Dates of Event _____ Today's Date _____

Please respond as completely as possible to the following items in the space provided.

1. Has the 4-H Development Fund financially supported you in the past? _____ If so, please explain.

2. What do you hope to learn/gain from participating in this activity?

3. How will the Bourbon County 4-H program benefit from your participation in this activity?

4. If selected, would you be willing to conduct a short presentation on your activity to groups? (I.e. club meetings, Achievement Banquet, Friends of 4-H Dinner, etc) Yes ___ No ___

**** Submit application to Extension Office 15 days prior to event registration deadline.**

**** Amount awarded is dependent upon funds available.**

**** Funds will be distributed after verification of attendance at event.**

 Parent/Guardian's Signature (Approval to attend)

 Leader's Signature (Verifying member in good standing)

 4-H Member's Signature

 Date

Fund Use Only	
Approved _____	
Amount _____	
Fund Initials	
_____/Date _____	
_____/Date _____	
_____/Date _____	

January 2008

Please return application in a sealed envelope to the Extension Office to be reviewed by the Development Fund Board.