

## THE GIFT WRAPPING RECORD SHEET

NAME _____	GRADE _____
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ADDRESS \_\_\_\_\_  
 Street City Zip

NUMBER OF YEARS IN 4-H (Include this year)\_\_\_\_\_

NUMBER OF YEARS IN GIFT WRAPPING (Include this year)\_\_\_\_\_

LEADER'S SIGNATURE \_\_\_\_\_

DATE	OCCASION	SHAPE OF PACKAGE	CONTENTS OF PACKAGE	SIZE OF PACKAGE	MATERIALS USED