

## FOUNTAIN COUNTY 4-H MEMORY BOOK RECORD SHEET

Name \_\_\_\_\_  
(first) (middle) (last)

Home Address \_\_\_\_\_ Zip \_\_\_\_\_

Gender (check one): \_\_\_\_\_ Male \_\_\_\_\_ Female

Home Telephone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Place of Home Residence: (check one) \_\_\_\_\_ Farm \_\_\_\_\_ Non ☐ farm/Town

School \_\_\_\_\_

Grade (leading up to Fair) \_\_\_\_\_

Number of Years in 4 ☐ H (Including this year) \_\_\_\_\_

Name of Your 4 ☐ H Club \_\_\_\_\_

### STATEMENT BY 4 ☐ H MEMBER

I have personally prepared this report and believe it to be correct.

\_\_\_\_\_  
Signature of 4 ☐ H Member Date

### APPROVAL OF THIS REPORT

We have reviewed this report and believe it to be correct.

\_\_\_\_\_  
Signature of Parent or Guardian Date

\_\_\_\_\_  
Signature of 4 ☐ H Leader Date