



**2009-10 Illinois 4-H Group Enrollment/Re-Enrollment Form  
DuPage County**



- New**  
 **Re-enroll**

One of these forms is needed both for enrolling new groups and re-enrolling pre-existing groups. Completed *Individual Enrollment Forms* or *Individual Re-Enrollment Forms* for the group's participants should be alphabetized, attached to this form, and submitted to the County/Unit Extension Office.

**Group Name** \_\_\_\_\_ **EIN** \_\_\_\_\_  
(if club has obtained one)

**Leader who serves as main contact** \_\_\_\_\_  New  
 Re-enroll

**Leader who should be sent publications** \_\_\_\_\_  
(An individual Enrollment Form for these leaders should be attached to this form along with all other participants in this group.)

**List group projects from project list in which all members will participate (list more on back)**

- Project Name \_\_\_\_\_  Publications needed
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As leader of this 4-H club/group, I certify that this 4-H club/group will not restrict or deny any person membership or participation in its program or activities because of race, color, religion, gender, racial origin, ancestry, marital status, sexual orientation or disability. This form constitutes a request for use of the 4-H name and emblem for educational purposes in accordance with regulations and policies of University of Illinois Extension.

SIGNED - CLUB/GROUP LEADER \_\_\_\_\_

**Complete only if this group was in existence last year and had a treasury.** As leader of this club/group, I certify that this 4-H club/group has presented to the local Extension office, a statement of accounting for the prior 4-H year if it was active at that time. This statement of accounting consisted of an audited Illinois 4-H Treasurer's Record Book for that year.

SIGNED - CLUB/GROUP LEADER \_\_\_\_\_

I certify that I have reviewed the statement of accounting for this club/group and will maintain a photocopy of the treasurer's report in the Unit Office for a period of three years. The original 4-H Treasurer's Record Book has been returned to the club/group.

SIGNED - EXTENSION UNIT OFFICE STAFF \_\_\_\_\_

**To be completed by Extension Office Personnel for new groups or if group's status has changed from prior year.**

**Group Type -**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Community Club    | <input type="checkbox"/> Community Special Interest    | <input type="checkbox"/> Admin Group (Council)           |
| <input type="checkbox"/> School Club       | <input type="checkbox"/> School Special Interest       | <input type="checkbox"/> Admin Group (E&R Committee)     |
| <input type="checkbox"/> After-School Club | <input type="checkbox"/> After-School Special Interest | <input type="checkbox"/> Admin Group (4-H Federation)    |
| <input type="checkbox"/> Military Club     | <input type="checkbox"/> Community Short Term          | <input type="checkbox"/> Admin Group (Indirect Admin)    |
|  | <input type="checkbox"/> School Short Term             | <input type="checkbox"/> Admin Group (Middle Management) |
| <input type="checkbox"/> Camp - Day        |  |  |
| <input type="checkbox"/> Camp - Overnight  | <input type="checkbox"/> Independent Participant       |  |

**Special funding source**

- EFNEP  
 FNP

**Integrated Community**

- Yes  
 No

**Coalition**

- Yes  
 No