



NATIONAL 4-H FORESTRY INVITATIONAL OBSERVER REGISTRATION FORM

STATE _____

CONTACT PERSON _____

TELEPHONE _____ EMAIL _____

CITY _____ STATE _____ ZIP _____

If you have more than one observer attending, fill out one form for each observer.

OBSERVER INFORMATION (Please give complete address, etc.)

NAME (1) _____ M ___ F ___

ADDRESS _____ T-shirt size: M, L, XL, XXL

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

ARRIVAL DATE/TIME _____

DEPARTURE DATE/TIME _____

Does the Observer need a ride from the Clarksburg airport? Yes _____ No _____

Is the observer a vegetarian? Yes _____ No _____

What type of vegetarian? Vegan? _____ Lacto-ovo? _____

Observer will attend the Sunday Bar-B-Q? YES _____ NO _____

PLEASE RETURN NO LATER THAN JULY 1

To: Dave Jackson, Penn State Cooperative Extension, 420 Holmes Avenue, Willowbank
Building Room 322, Bellefonte, PA 16823,

E-mail: drj11@psu.edu

Fax: 814-355-6983