

Alabama 4-H Group Enrollment Form

County Name: _____ Program/Group Name: _____
(Be specific; use 'TGIF', or 'JMG' if appropriate)

Type of 4-H Group Enrollment Delivery Method:

- 700 Community Program
 710 In-School Program
 720 After-School Program
 800 Overnight Camping Program
 810 Day Camp Program

Project Code(s): (list on back) _____

Location of Program: _____ Event/Program Leader: _____

Start Date: ____/____/____ Completion Date: ____/____/____

Number of Sessions/Units _____ X Length of Sessions _____ = Hours of Contact _____



Youth Participants

RACE & ETHNICITY	Hispanic	Non-Hispanic
White		
Black or African American		
American Indian or Alaskan Native		
Asian		
Native Hawaiian or Pacific Islander		
Other or Combination		

GENDER	
Male	
Female	

RESIDENCE	
Farm	
Rural (under 10,000)	
Town (10,000 – 50,000)	
Suburbs of Cities >50,000	
Central Cities >50,000	

GRADE	
K	
1 st	
2 nd	
3 rd	
4 th	
5 th	
6 th	
7 th	
8 th	
9 th	
10 th	
11 th	
12 th	
12 th +	
NIS	
Special	