

# Hardin County 4-H Participation Form

(Please Print)

Name of Participant \_\_\_\_\_

Address \_\_\_\_\_  
Street/Road City State Zip Code

Telephone \_\_\_\_\_ Date of Birth \_\_\_\_\_

School Attending \_\_\_\_\_ Grade \_\_\_\_\_

In case of an emergency, contact:

\_\_\_\_\_ Name Telephone

\_\_\_\_\_ Name Telephone

The above named individual has permission to participate in 4-H Youth Education Programs, under the leadership of an adult 4-H Volunteer, and the Ohio State University Extension, Hardin County. The 4-H Volunteer and/or Ohio State University Extension, Hardin County is not responsible for injury or accident while the youth is involved in the 4-H program or activity.

Signed \_\_\_\_\_  
Parent/Guardian Date

