

# Jackson County 4-H Association - Enrollment Fee Assistance Application

All information is kept confidential.

Participant's Name(s) \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Address \_\_\_\_\_ County \_\_\_\_\_

Phone \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

**Total Cost:** \$ \_\_\_\_\_

**The amount of the cost I am able to pay:** - \$ \_\_\_\_\_

**Amount requested from Jackson County 4-H:** = \$ \_\_\_\_\_

1. Have you previously received financial assistance from Jackson County 4-H? Yes No

If yes, when and for what purpose? \_\_\_\_\_

2. Is this your first year in 4-H?  Yes No Please list club name and projects:

\_\_\_\_\_

3. **Financial need:** To be completed by parent/guardian, Extension staff, or volunteer leader. Please provide information and statement regarding the financial need of this individual to assist the selection committee in making allocations. (Examples include: loss of job(s), foster child, single parent, one income household, etc.)

\_\_\_\_\_  
\_\_\_\_\_

4. Why would you like to enroll in 4-H? What do you hope to learn?

\_\_\_\_\_  
\_\_\_\_\_

*The Jackson County 4-H Association is committed to having no financial barriers between youth and the 4-H Youth Development Program. I understand that financial assistance is given at the discretion of the OSU Extension Service and/or Jackson County 4-H Association Board of Directors, and are subject to availability. All scholarships are on a first come, first served basis. No applications will be accepted without proper signature.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return to: Jenny Magerle [sxychevy@aol.com](mailto:sxychevy@aol.com) or you may drop them off at the Extension Office by Jan. 31 or March 15, 2021.**

**Southern OR Research & Extension 569 Hanley Rd., Central Point OR 97502**

Questions? Contact us at: 541-773-7371 or <http://extension.oregonstate.edu/4h/jackson>

## Office Use Only:

Date Received: \_\_\_\_\_ Date Approved \_\_\_\_\_ Approved by \_\_\_\_\_

Amount Awarded \$ \_\_\_\_\_ Source:  Waiver  JC4HA  Other \_\_\_\_\_