Request for 4-H Membership Across County Lines

This form must be completed by any youth requesting 4-H membership in a county other than their primary residence. The “4-H Community Club Membership Across County Lines” policy document contains additional information (available from your local OSU Extension office). Permission for 4-H membership across county lines should not be assumed. You will receive official notification from the county of request.

Steps:
1. Provide all requested information. Do not leave anything blank on this request form.
2. Take this completed request form to the county OSU Extension office in which 4-H membership is being sought (the county of request).
3. The 4-H professionals in the county of request AND the county of residence will discuss your request and make a determination. Their decision shall be final and not subject to appeal.
   Note: There must be a fully-funded 4-H program in both counties in order for your request to be valid.
4. The 4-H professional in the county of request will provide written notification to you regarding the joint decision of the 4-H professionals in each county.

County of Request: ___________________________  County of Residence: ___________________________

Will market animals, other livestock, horse, or dogs be taken as 4-H projects? (circle one)  YES  NO
If yes, which project(s): ___________________________________________________________________

Why are you seeking 4-H membership outside of your county of residence?
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

Date of Request: ______________  Preferred Phone Number: ___________________________ (cell / home)
Name: ___________________________  Date of Birth: ____________  Age (as of Jan. 1): ______
Address: ___________________________  City: ___________  State: ___________
School District: ___________________________  Current Grade in School: _________  ZIP: ________

If you are a current or previous 4-H member:
Years in 4-H: ___________  In what county(ies): ___________________________
Projects taken: ___________________________________________________________________

If accepted for cross-county lines membership, we understand that it is our responsibility as a 4-H family to review and understand all 4-H rules, policies, and guidelines of the county we wish to join and to ask questions when we do not understand.

Youth Signature: ________________________________  Date: ______________
Parent/Guardian Signature: ________________________________  Date: ______________

For Office Use Only  □ Not Approved  □ Approved: date notification sent: ______________. If conditions/restrictions, list:

4-H professional county of residence: ___________________________  Date: ______________
4-H professional county of request: ___________________________   Date: ______________

Updated 12/15 K. Blair