

DANNY WILDS 4-H MEMORIAL AWARD

ESTABLISHED 1969

This 4-H award is a monetary grant in memory of Daniel Len Wilds. Danny was an eight-year member of the Big Valley 4-H Club, who maintained a growing interest in 4-H club work, agriculture and education. The primary purpose for this award being established was as a tribute to Danny. The committee has dedicated these funds to financially assist 4-H members to attend summer camp. Scholarships will be awarded to 4-H members who want to attend camp, and could not go without some assistance.

ELIGIBILITY REQUIREMENTS

This award is available to Lake County 4-H members ages 9-13 years of age as of December 31st of the program year in need of financial assistance to attend 4-H Camp.

PROCEDURE REQUIREMENTS

1. Complete a *4-H Summer Camp* registration packet and send it to the 4-H office at 883 Lakeport Blvd., Lakeport, CA 95453 or FAX to (707) 263-6838. Do not include a deposit or payment.
2. Turn in your *Danny Wilds 4-H Memorial Award* application to the **Lake County 4-H Office by April 24, 2026**. Mail applications to the UC Cooperative Extension/4-H Office, 883 Lakeport Blvd., Lakeport, CA 95453 or FAX to (707) 263-3963. Incomplete applications will not be considered.
3. Any Questions please contact the 4-H Office, 707-263-6838.

PAYMENT PROCEDURES

1. A Camp Fee of \$250.00 will be paid by the 4-H Council directly to the Mendocino-Lake 4-H Summer Camp in your name. Any additional camp fees will be the family's responsibility to pay.
2. In the event you are unable to attend please notify the 4-H Office so the award can be transferred to the next 4-H member eligible.

**APPLICATION
DANNY WILDS 4-H MEMORIAL AWARD
FOR 4-H SUMMER CAMP**

(form to be completed by parent or guardian)

UC Cooperative Extension/4-H Office • 883 Lakeport Blvd., Lakeport, CA 95453
Phone: (707) 263-6838 • FAX: (707) 263-3963

Date: _____

1. Parent/Guardian Name: _____
2. Relationship to camper: _____
3. Mailing Address: _____
4. Please explain your financial need for this award: _____

5. 4-H Members Name: _____
6. 4-H Members Grade Level: _____
7. How many years has the camper been in 4-H? _____
8. What are their projects of interest? _____
9. Annual Family Income: 0-30,000 31,000-44,000 45,000+
10. Is a Parent/Guardian attending as a Chaperone? YES NO
11. What portion of the summer camp fee are you able you pay? _____
12. Parent/Guardian Signature: _____

(Signing this application certifies that the data listed by the applicant is correct.)

RETURN COMPLETED APPLICATION TO THE LAKE COUNTY 4-H OFFICE BY April 24, 2026.