

Request for 4-H Program Fee Waiver/Reduction

The 4-H Youth Development Program is open to participants, regardless of their ability to pay. Program fees will be waived or reduced for eligible youth. Provisions will be made by the 4-H unit (e.g., club) or volunteer management organization to cover program fees for eligible youth who are unable to pay them. It is recommended the parent/guardian of an eligible youth for which a program fee waiver or reduction is requested should complete, sign and submit this form. However, parent/guardian of eligible youth may also contact the county 4-H office to discuss the current local process for Fee Waiver/Reduction requests.

Name	of 4-H Youth (Print):		
	(First)	(Last)	
4-H Ur	nit/Club Name:		
Progra	m Year: 20 20		
	I am requesting a waiver of the program fee in full.		
	I am requesting a reduction of the program fee to the amount of \$		
	To determine eligibility for a full waiver or reduction of the program fee, please indicate if:		
Annual household cash income is at or below \$54,150. See Reference: https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines . 2025-202 guidelines.			
	If yes, you are eligible to apply for a reduction or waiver of	ou are eligible to apply for a reduction or waiver of your 4-H program fees.	
	Full Name of the Parent/Guardian of Youth (Print)		
	Signature of Parent/Guardian of Youth	Date	
	turn To: (insert UCCE county office address below)		

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