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| **UCCE Marin County - 4-H Club Information 2019-2020 Sheet**  Please submit this form as soon as the information is confirmed and no later than September 15 to Steven Worker at [smworker@ucanr.edu](mailto:smworker@ucanr.edu). Or complete this form online at <http://ucanr.edu/marinccl> | |
| 4-H Club Name: |  |
| Meeting Location and Address: |  |
| *Please contact us if your location needs a facility use agreement or certificate of insurance.* | |
| Regular Meeting Date of the Month: |  |
| Regular Time of Meeting: |  |
| Is your meeting location wheelchair accessible? [ ] yes [ ] no | |
| **4-H Club Leader** | |
| Name: |  |
| Email: |  |
| Phone: |  |
| Title: | [ ] Primary Club Leader (CCL) [ ] Co-Club Leader (Co-CCL) [ ] Assistant Club Leader (Asst CCL) [ ] Treasurer Advisor  [ ] Enrollment Coordinator (VEC1) |
| Should monthly bank statements be emailed to this person? [ ] yes [ ] no | |
| **4-H Club Leader *(optional)*** | |
| Name: |  |
| Email: |  |
| Phone: |  |
| Title: | [ ] Primary Club Leader (CCL) [ ] Co-Club Leader (Co-CCL) [ ] Assistant Club Leader (Asst CCL) [ ] Treasurer Advisor  [ ] Enrollment Coordinator (VEC1) |
| Should monthly bank statements be emailed to this person? [ ] yes [ ] no | |
| **4-H Club Leader *(optional, add more lines if needed to include all Co Leaders)*** | |
| Name: |  |
| Email: |  |
| Phone: |  |
| Title: | [ ] Primary Club Leader (CCL) [ ] Co-Club Leader (Co-CCL) [ ] Assistant Club Leader (Asst CCL) [ ] Treasurer Advisor  [ ] Enrollment Coordinator (VEC1) |
| Should monthly bank statements be emailed to this person? [ ] yes [ ] no | |