



NEW MEXICO 4-H LEADER ENROLLMENT



DATE _____ COUNTY HARDING CLUB NAME _____
Month/Day/Year

Check here if address correction or phone number change is required.

First Name Middle Initial Last Name

Mailing Address City State ZIP

Male Female Telephone: *Home* _____ *Work* _____ *Cell* _____

Email Address: _____ *Social Security #* _____

LEADER ROLES

Please check all items below that best describe your 4-H responsibilities.

A VOLUNTEER WORKING DIRECTLY WITH YOUNG PEOPLE (USUALLY IN 4-H CLUBS)

1. Organizational Leader
2. Assistant Organizational Leader
3. Project Leader
4. Activity/Resource Leader (*Demonstrations, judging, recreation, club communications*)
Area of Responsibility _____
5. Teen Leader

B VOLUNTEER WORKING INDIRECTLY FOR 4-H EXPANSION

1. Advisory Group Leader
2. School Enrichment / Special Interest
Area of Responsibility _____
3. Multi-Club Leader
Area of Responsibility _____
4. Public Relations & Recruitment
(*Newsletter, Radio, Newspaper Publicity*)

This is my _____ Year as a 4-H Volunteer.

Have you ever been:

- >Convicted of a criminal offense?
- >Convicted for the use or sale of drugs?
- >Hospitalized or treated for alcohol or substance abuse?
- >Convicted of child neglect or abuse?
- >Convicted of a DUI offense?

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Reference: Name _____
 Phone: _____
 Address _____

Reference: Name: _____
 Phone: _____
 Address: _____

If YES to any of these, please explain or discuss with extension agent.

As a leader, I certify that this 4-H Club does not discriminate or limit membership because of race, sex, color, national origin, religion, or handicap.

Signature of Leader _____

PROJECT INFORMATION – (Check One) First Year Leader Re-enroll Corrections

PROJECT NUMBER	NAME OF PROJECT	SEND PROJECTS		YEARS IN PROJECT
		YES	NO	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

FOR COUNTY USE ONLY

County Number _____ Club Number _____ Club Code _____
 Residence Code _____ Ethnic Code _____ Date Entered _____
 Leader I.D. _____