



## Paper Clover Campership/Scholarship Fund Application

Please submit this application to request funds to financially assist Arizona 4-H members to attend a camp or leadership activity. Please attach a registration form from the camp or leadership activity, if applicable, or provide the address funds should be mailed to. Application must be received with appropriate time for processing, before the scheduled event.

Applicant Information			
County:	Date:		
Applicant Name:			
	Last	First	М.І.
Parent email address:			
Name of			
4-H Club:			
Camp or Leadership			
Activity:		Amount Requesting: <u>\$</u>	
Cost of Camp or Activity:			
		Did you participate in a	
Date of Camp or Activity:		TSC Event? (Date?):	
Are you a member in Good Stand	ling?		

Why do you want to attend this camp or leadership activity?:

Parent Signature	Date
County Extension Signature	Date
For State	Office Use Only
Approved Amount:	_
State Extension Signature	Date
Date Funds sent:	

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