Arizona 4-H Charter Application
(Revised 4/2017)

County: ____________________________ Date: ____________________________

Name of 4-H Club/Group: ______________________________________________________

Date 4-H group was established (if previously in existence): ____________________________

# of current 4-H youth members ________ # of current certified 4-H volunteer leaders: ______________

Has a copy of the club’s draft yearly program plan been submitted to the county? Yes ____ No ____

Has a copy of the club’s preliminary bylaws been submitted to the county? Yes _____ No _____

The _______________________ club/group in _____________ county meets the requirements to be a 4-H authorized group and respectfully requests an official 4-H Charter in order to operate as a legal 4-H group.

One current certified 4-H volunteer who will provide adult leadership for the group

Name ____________________________________________________________

Address ____________________________________________________________

City ____________________________ Zip ____________________________

E-mail address ______________________________________________________

Ph (____) ____________________________

If the club or group plans to open a bank account, fund-raise, accept donations or apply for grants, then an EIN (Employer Identification Number) is required from the IRS. Please note EIN # ______________________________________

Our 4-H group declares that it does not discriminate in its membership or program practices on the basis of race, color, religion, national origin, sex, age, disability, veteran status, or sexual orientation. The nondiscriminatory nature of this club’s membership and activities will be made known to the local community by all reasonable efforts.

I am in agreement to the above statement. Required Signatures:

_________________________________ (Club President)  _____________________________________ (Club Secretary)

_________________________________ (Certified 4-H Volunteer Leader)  ___________________________ (County Extension Agent)

**Official Arizona 4-H Office Use Only:**

Charter Approved ____ Yes ____ No ____ n/a  Date Charter Approved: ___________________________

Charter not approved for the following reason(s): __________________________________________

(Official Signature) __________________________________________

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