

Polk County 4-H Participant Application for 2019 Space Camp
April 25-29, 2019

Completed Form with Signatures, and a Leader Recommendation Form Due October 29, 2018 to the Polk County Extension Office!! No late applications will be accepted!!You may attend this educational experience only once.

Name: _____ Grade: _____

Address: _____

City: _____ Telephone: _____

4-H Club: _____ Number of year of 4-H Membership: _____

4-H Projects:

Describe 4-H Leadership and or teaching roles you have had through 4-H:

Why Do You want to attend Space Camp? _____

What do you hope to gain from your experience as a Wisconsin 4-H Space Camp Participant?

Applicant has completed a record book for the previous year 2018: _____

Club Leader Signature: _____ (date) _____

I give my permission for my child to participate in this program. If for some reason my child is sent home early I agree to pay the entire program participation fee.

Parent Signature

Date