



GROUP PAYMENT FORM

If your unit or portion of your unit, (i.e. individual clubs) has their fees covered by a sponsor, the local unit, 4-H club(s), 4-H Council or 4-H Foundation, should submit this form along with a check payment for the Kansas 4-H Program Fee. Please submit to State 4-H office no later than December 15, 2017. Please note that the local sponsor must write their check made payable to the local entity, and the local entity must then write a check made payable to "Kansas 4-H Youth Development".

GROUP CONTACT INFORMATION

GROUP NAME		PHONE	
CONTACT PERSON		EMAIL	

Please list information for each member receiving sponsorship or attach a list. Include additional pages, if needed.

PAYMENT INCLUDED FOR THE FOLLOWING YOUTH

FIRST NAME	LAST NAME	4-H CLUB	LOCAL EXTENSION UNIT

The Kansas 4-H Program Fee is \$15 per youth member, 4-H ages 7-18.* There is no fee for Cloverbuds.
Total youth covered _____ X \$15 program fee = _____ total amount owed.

MAKE CHECK PAYABLE TO:
Kansas 4-H Youth Development

MAIL TO:
4-H Youth Development
201 Umberger Hall
1612 Claflin Rd.
Manhattan, KS 66506

STATE OFFICE USE ONLY

DATE RECEIVED	CHECK NO	AMT DUE	AMT ENCLOSED
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