

# Camp Sponsorship Request Form\*

(to be filled out by member)

**Due Date:  
May 31**

Name \_\_\_\_\_ Club \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Age \_\_\_\_\_

Grade \_\_\_\_\_

Years of 4-H Club membership \_\_\_\_\_

Number of family members also attending camp \_\_\_\_\_

How many years have you attended 4-H camp? \_\_\_\_\_

How many past sponsorships have you received? \_\_\_\_\_

Do you qualify for free or reduced lunch in school? \_\_\_\_\_

\*State in your own words why you would like to go and how you will USE what you learn at this event:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If this request is granted, you will receive a \$50 sponsorship to Shawano County 4-H Camp. To help replenish this fund, you and your parent/guardian will be required to work in the 4-H Food Stand for one (1) shift. (2 requests = 4 people required)

**2019 Dates still available to work in food stand:**

**Sunday, June 16**

**Shift 1: 5:45-1pm**

**Shift 2: 11:00am-closing**

We will confirm with you which shift you will be working.

Circle your top preferred shift above.

\_\_\_\_\_  
Member signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/guardian signature

\_\_\_\_\_  
Date

**4-H Club Leader Section:** Is this member actively involved in your club? \_\_\_Yes \_\_\_No

Additional Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
4-H Club Leader Signature, other than a parent (does not need to be General Leader)

\_\_\_\_\_  
Date

To be eligible, this form and your camp registration form are due by the Camp Early Bird registration deadline..

**\*Please be advised that 4-H Sponsorship funds are intended to assist families who are currently in need of financial assistance. Families who are able to pay their share of 4-H trip costs without aid are asked to do so. All fund requests are kept strictly confidential.**