



JACKSON COUNTY 4H VOLUNTEER FORM
MUST BE TURN IN WITHIN 60 DAYS OF EVENT



4H MEMBER NAME: _____ PHONE NUMBER: _____

4H AGE: _____ (as of Jan 1st of current year) 4H CLUB: _____

VOLUNTEERED HIS/HER TIME ON (one agency/event per sheet)

Date Of Event: _____; _____; _____

Forms without a date will not be accepted.

Time Volunteered (# of hours): _____; _____; _____; _____

Service Agency/Event & Location: _____

SERVICE PROVIDED: Was this event promoting the 4-H program? Yes or No

CONTACT PERSON: _____ PHONE NUMBER: _____

ADULT SUPERVISOR SIGNATURE: _____ DATE: _____

RETURN TO VOLUNTEER COORDINATOR:

Melissa Powell
 10544 Cooper Rd.
 Pleasant Lake, MI 49272



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