

## 4-H Activities Funding Request

**DUE:** At least one month prior to the activity and must be presented to the Volunteers Association Meeting prior to the activity.

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

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

Name of 4-H Activity: \_\_\_\_\_

Location of Activity: \_\_\_\_\_

Date(s) of Activity: \_\_\_\_\_

**Anticipated expenses for participation in Activity:**

Registration Fee: \_\_\_\_\_

Travel: (Airfare costs or mileage if driving) \_\_\_\_\_

Lodging Expenses: \_\_\_\_\_

Other Expenses: \_\_\_\_\_

**Other sources of support for this activity:** \_\_\_\_\_

**Special Needs (Please supply additional information that affects attendance at this activity):**

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

**NOTE:** If funds are allocated for this activity receipts or proof of participation are required. In addition, participants are expected to provide a report or program upon completion of this event to share what they learned with others from this experience.

**Approved by:** \_\_\_\_\_  
(Volunteers' Association Representative)