## **ERIE COUNTY 4-H YOUTH DEVELOPMENT PROGRAM**

4-H Capital Days Application—May 19-21, 2024 Application due by February 15, 2024

Name:			
Age:Number of years in 4	Number of years in 4-H:		
Address:			
City, State, Zip:			
Phone Number:Email:			
Phone Number:Email: Name of 4-H Club/Individual Member:			
(20 points) What do you expect to learn from participating in this trip (use the			
(20 points) What have you done through the 4-H program that has helped pre- (respond in the space provided below)?	pare you for this trip		
(10 points) Please indicate your willingness to share the results of your trip w do this?	ith others. How would you		
(15 points) What leadership roles have you demonstrated or learned through	4-Н?		

(15 points) What Community Serv	ice projects have you participat	ed in?	
(5 points) What County fundraiser	(s) have you participated in 202	22 or plan to in 2023 <sup>°</sup>	?
Those chosen for 4-H Capital Days w 21, 2024. It is the responsibility of the The 4-H Program will cover all other these specified expenses and miscell. Note: If needed, the finalists will be a	nose youth to cover the cost lunch expenses, including transportation aneous spending money?	on Sunday, May 19 an on to and from Albany.	d Tuesday, May 21.
4-H Member Signature Date	Parent Signature	e Date	
Extension Educator Signature Date	_		
Return completed application to:	Tammi Kron Cornell Cooperative Extension E	-	

21 South Grove Street, Suite 300 East Aurora, New York 14052 RE: Capital Days Application