

# **Strafford County Youth Leadership Workshop**

January 21, 2017 10:00 am - 3:00 pm

Barrington Middle School, 20 Haley Drive

Barrington, NH

**Registration is due to the County Office by January 16, 2017**

Name of youth member \_\_\_\_\_

Birthdate/age \_\_\_\_\_

Enrolled in 4hOnline      Yes      No

4-H Club \_\_\_\_\_

Name of parent/guardian \_\_\_\_\_

Emergency phone number \_\_\_\_\_

Name of person picking up child \_\_\_\_\_

Allergies \_\_\_\_\_

Dietary restrictions \_\_\_\_\_

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My child's medical and health forms are up to date on 4hOnline

Release is up to date on 4hOnline

NH Youth Code of Conduct is up to date on 4hOnline

I \_\_\_\_\_ give my child permission to participate in a 4-H sponsored leadership development workshop. Both my child and I understand that they will be asked to interact with others in a collaborative environment.

*After completing this fillable form save on your computer and attach completed form via e-mail to [Kristen.Landau@unh.edu](mailto:Kristen.Landau@unh.edu)*