California 4-H Alumni Information

Name

Home Address

City

Zip

Phone number M o b ile Email address Business name

Business address Phone number I would like to receive information about the 4-H alumni program Yes No

4-H Affiliation: State or county of 4-H participation

 Former 4-H member from to

 Parent of a 4-H member from to name(s)

 Grandparent of a 4-H member from to name(s)

Spouse

Spouse business name Phone number

Spouse business address

Does your employer have a matching gift program? Yes

Spouse 4-H Affiliation: State or county of 4-H participation

 Former 4-H member from to

 Parent of a 4-H member from to name(s)

 Grandparent of a 4-H member from to name(s)

 Volunteer Leader from to

|  |  |  |  |
| --- | --- | --- | --- |
| *Please send all communications to* | *Me only* |  | *Me and my spouse* |
| *Please send via:* | *Mail and/or* |  | *or Email* |
| *Please send to my:* | *Home* |  | *Office* |

Yes, please sent my information on to the California 4-H Foundation [ ]

**Return to: Mendocino County 4-H c/o UCCE 890 N. Bush Street Ukiah CA 95482**