



Club Information Form



Due to the 4-H Office by: **September 5, 2024**

2024-2025 Program Year

Club Name: _____

Community Leader: _____

Co-Community Leader(s): _____

Meeting Location (with address) : _____

Meeting Day and Time: _____

Person to contact for more info about the club: _____

Contact info: _____

Phone

Email

Bank Name: _____

Bank Location: _____

Checking Account #: _____

Savings Account # (if applicable): _____

Individual who should receive bank statements (the statements will be sent from the 4-H office):

Check one: Community Leader Treasurer Other

Name: _____

Mailing Address: _____

Please list the names of the individuals who are on the Bank Signature Card:

Name	Youth or Adult	Phone or Email

