



Request for Official Approval for
Establishment of New 4-H Unit and Club Charter

Date of Application: _____

Name of Group: _____

Type of Group: _____
(Example: 4-H Club, Special Interest Group, School Enrichment Project, Camping Program)

Purpose of Group: *(Example: to carry out a 4-H Bicycle Care and Safety Program or to carry out a continuous 4-H club program serving the need of youth in the community, providing them a variety of 4-H projects and learning opportunities)*

Volunteer Leader or Other Person in Charge of 4-H Unit:

Name: _____

Complete Mailing Address:

Address: _____

City: _____

State: _____

Zip: _____

Phone Number: _____ E-Mail Address: _____

Official Approval for New 4-H Unit

On the basis of the above purpose(s), the _____ is authorized to use the 4-H name and emblem in connection with its program and activities and is considered an official 4-H unit of the _____ Extension program.

State 4-H Program Administrator

(Date)

Mail to:

State 4-H Program Administrator
114 Agriculture Hall
UNL/East Campus
Lincoln, NE 68583-0700

Fax to:

State 4-H Program Administrator
(402) 472-9024