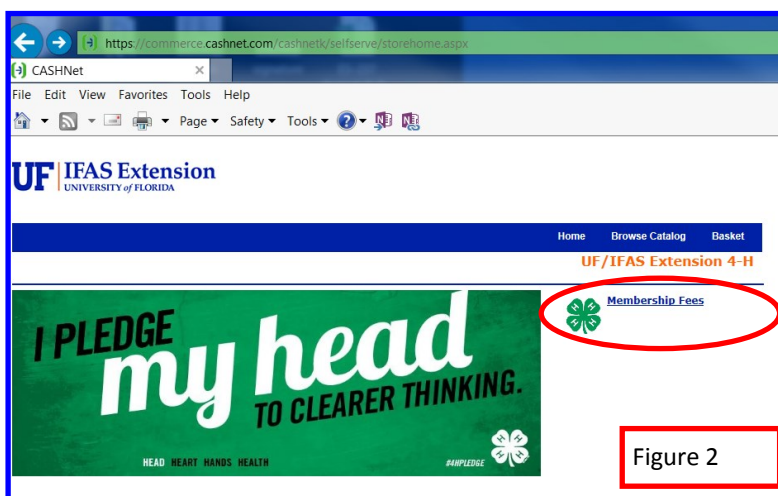


Steps to Pay Annual Membership Fee by Credit or Debit Card:

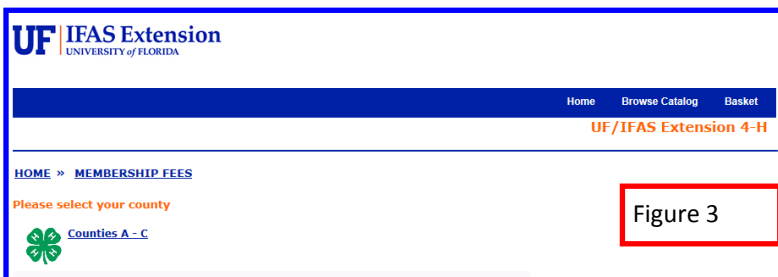
1. Visit <http://florida4h.org/membershipfees/>
2. Click on the "Pay Annual Membership Fee" link. This will direct you to the CASHNet® e-commerce payment website. CASH-Net® is owned by Higher One, Inc. See Figure 1



3. When you see the payment website, click on Membership Fees. See Figure 2



4. Select your county.* See Figures 3 & 4



*See page 4 of instructions for Family Determined payment option.

5. On your county page input parent information (name, address, and phone number). See Figure 5

HOME » MEMBERSHIP FEES » COUNTIES A - C

4-H Alachua County and State Annual Membership



Please Input Parent Information

*Parent's First Name:

*Parent's Last Name:

Address:

City:

State:

Zip:

*Telephone Number:

Cell Phone Number:

Figure 5

6. Provide the first and last name of each community club youth you will be paying for with this transaction.
7. Choose the number of memberships and payment amount. Click Add to Basket. See Figure 6

Please provide the **First and Last Name** for each youth requesting a membership.

*First Name:

*Last Name:

First Name:

Last Name:

First Name:

Last Name:

First Name:

Last Name:

First Name:

Last Name:

First Name:

Last Name:

Please choose the number of memberships

*Select Membership:

Price: \$0.00

To pay for this item, click the button below.

[Add to Basket](#)

Figure 6

8. Review your selections. See Figure 7

Item Code	Edit	Delete	Amount
4-H Alachua County and State Annual Membership Parent's First Name: Albert Parent's Last Name: Gators First Name: Ali Last Name: Gators First Name: Robert Last Name: Gators Select Membership: 2 Memberships	Edit	Delete	\$40.00
Total Amount			\$40.00

[Continue Shopping](#) [Checkout](#)

Figure 7

9. Provide credit or debit card payment and billing information. See Figure 8

Enter credit card information

Credit Card Number:

Expiration Month:

Expiration Year:

Cardholder Name:

Address:


City:

State/Province/Region:

Zip/Postal Code:

Country:

Email Address:

We accept: 

(You'll have a chance to review this order before it's final.)

[Continue Checkout](#)

Figure 8

10. Provide acknowledgement and acceptance of the terms and conditions of the Higher One, Inc. User Agreement. See Figure 9

This site is owned and operated by Higher One, Inc.

I acknowledge that I have read and accept the [terms and conditions](#) of the Higher One, Inc. User Agreement.

[Review Charges](#) [Cancel My Transaction](#) [Continue Checkout](#)

Figure 9

11. Review your Items Selected and Payment Information.

12. Click Submit Payment. See Figure 10

Please confirm the information below. To submit your payment, click on the 'Submit Payment' button.

Items Selected	Amount
4-H Alachua County and State Annual Membership	\$40.00
Parent's First Name: Albert	
Parent's Last Name: Gators	
First Name: Ali	
Last Name: Gators	
First Name: Robert	
Last Name: Gators	
Select Membership: 2 Memberships	
Total Amount	\$40.00

Payment Information

Credit Card Number: [REDACTED]
Expiration Date: [REDACTED]
Cardholder Name: [REDACTED]
Address: [REDACTED]
City: [REDACTED]
State/Province/Region: [REDACTED]
Zip/Postal Code: [REDACTED]
Country: [REDACTED]
Email Address: [REDACTED]

[Submit Payment](#)

Figure 10

13. When the transaction is approved, you will have the option to view a printable receipt and a receipt will be e-mailed to the e-mail address provided in the payment section. Close your browser or click End Session at the top of the page. See Figure 11

Home Browse Catalog Basket End Session

UF/IFAS Extension 4-H

Transaction Approved

Dear 4-H Family,

This is your official receipt for your Florida 4-H Annual Community Club Membership Fee payment. You may e-mail 4Hfees@ifas.ufl.edu or call 352.846.4444 if you need additional assistance.

Thank you,

Florida 4-H

UF/IFAS Extension 4-H Youth Development Program
2142 Shealy Drive
PO Box 110225
Gainesville, FL 32611
352.846.4444
<http://Florida4H.org/>

Receipt Number: 3848752

IFAS
Current Date: 08/10/2016

Description	Amount
4-H Alachua County and State Annual Membership	\$40.00
Parent's First Name: Albert	
Parent's Last Name: Gators	
First Name: Ali	
Last Name: Gators	
First Name: Robert	
Last Name: Gators	
Select Memberships: 2 Memberships	
4-H Alachua County and State Annual Membership - You may email 4Hfees@ifas.ufl.edu if you need additional assistance.	
Total	\$40.00

Payments Received	Amount
IFAS Web Credit Card Pmt	\$40.00
Visa 3000000000000000 [REDACTED]	
Authorization # 010921	
Total	\$40.00

UF IFAS Extension
UNIVERSITY OF FLORIDA

Thank you for your payment!

Refund Policy: To request a refund, please e-mail a copy your receipt to 4Hfees@ifas.ufl.edu and state the reason for the refund request in the e-mail.

Your receipt has been emailed to 4Hfees@ifas.ufl.edu

[Email Another Receipt](#) [View Printable Receipt](#)

Figure 11

Family Determined Amount Instructions

1. If the set membership fee total is more than your family can afford at this time, please select the “Family Determined Amount” option on the Browse Catalog page. See Figure 12

The screenshot shows the UF/IFAS Extension website interface. At the top, there is a navigation bar with 'Home', 'Browse Catalog', and 'Basket' links. Below this, the page title is 'UF/IFAS Extension 4-H'. The main content area is titled 'HOME >> MEMBERSHIP FEES'. A prompt says 'Please select your county'. There are several options, each with a green four-leaf clover icon containing the letters 'H' and 'F'. The options are: 'Counties A - C', 'Counties D - G', 'Counties H - J', 'Counties K - M', 'Counties N - P', 'Counties Q - Z', and 'Family Determined amount'. The 'Family Determined amount' option is circled in red. A red box labeled 'Figure 12' is positioned to the right of the options.

2. On the Family Determined page, select your 4-H County from the dropdown, provide parent and member information and specify the amount your family can manage to pay at this time. Click Add to Basket and proceed to Checkout to make your payment. See Figures 13a and 13b

The screenshot shows the 'Family Determined Amount' form. At the top left is a large green four-leaf clover logo with 'H' and 'F' on each leaf. To the right of the logo is the text 'Family Determined Amount'. Below the logo is a dropdown menu labeled '*Select Your Primary 4-H County:' with a '<Select>' option. Underneath is the heading 'Please Input Parent Information'. There are several input fields: '*Parent's First Name:', '*Parent's Last Name:', 'Address:', 'City:', 'State:', 'Zip:', '*Telephone Number:', and 'Cell Phone Number:'. At the bottom, there is a prompt: 'Please provide the First and Last Name for each youth requesting a membership.' A red box labeled 'Figure 13a' is located to the right of the form.

The screenshot shows the form for providing youth names. At the top, it says 'Please provide the First and Last Name for each youth requesting a membership.' Below this are several pairs of input fields for 'First Name:' and 'Last Name:'. A red box labeled 'Figure 13b' is positioned to the right of the first pair of fields. At the bottom of the form, there is a section titled 'Please input the amount you are able to pay.' with a 'Price:' input field. Below that is a prompt: 'To pay for this item, click the button below.' and an 'Add to Basket' button.