

Pay By Check or Money Order Form

Annual Community Club Membership Fee

If paying by check or money order, please complete this form and mail it to the address below with your payment.

4-H County: _____

Parent's Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone Number: _____

Check or Money Order Amount: _____

Check or Money Order Number: _____

Please list the first and last name of each community club youth member (4-H ages *8-18) in your family that you are paying for with this payment.

- * Cloverbuds, ages 5-7, will pay directly to IRC Extension office e-mail dc32@ufl.edu for more information
- 1) _____
 - 2) _____
 - 3) _____
 - 4) _____
 - 5) _____
 - 6) _____

Mail This Form and Payment to:

UF/IFAS Extension 4-H Youth Development Program
Attn: Membership Fees
2142 Shealy Drive
PO Box 110225
Gainesville, FL 32611-0225
Make checks payable to: University of Florida

Thank You for Your Payment!

