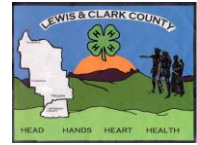




Lewis & Clark County 4-H Cloverbud Recognition



Name _____ Club _____

Number of years in Cloverbuds _____

Required:

1) Turn in completed Cloverbud Record Form to club leader.

Leader Initial

Electives: Complete at least 2 of the following electives:

1) Participate in Grand Foods.

Adult Initial

Entered _____

2) Participate in Demonstration Day.

Adult Initial

Title _____

3) Participate in Photo Show.

Adult Initial

Entered _____

4) Participate in Fashion Revue.

Adult Initial

Entered _____

5) Attended at least 3 Cloverbud workshops.

Adult Initial

Dates _____

6) Participated in at least one club activity.

Adult Initial

Activity _____

7) Exhibited at least one entry in the Fair.

Adult Initial

Entered _____

Signature _____ Date _____

I understand by completing this form and submitting it for recognition under the Lewis & Clark County 4-H program, I am responsible for the accuracy and honesty of the information I have provided.