



## 4-H Program Fee Waiver Form

(Submit this form if you are experiencing financial hardship and unable to pay the 4-H program fee. One form per 4-H family per year)

Please submit this form to the appropriate Illinois Extension office *after* completing your online registration through ZSuite. Completing this form will provide a waiver for all 4-H members listed.

Clark County Extension  
15493 N. State Hwy 1  
Marshall, IL 62441

Crawford County Extension  
216 S. Cross  
Robinson, IL 62454

Edgar County Extension  
210 W. Washington  
Paris, IL 61944

4-H member(s) name(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4-H Club Name(s): \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Family email: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Extension Director

\_\_\_\_\_  
Date