Hunt County 4-H
Heart O’ Texas Entry Check List

PLEASE COMPLETE ONE CHECK LIST PER FAMILY

DUE AUGUST 15th OR 16th, 2019 to EXTENSION OFFICE

Name: ___________________________    Quality Counts #: ______________________
Name: ___________________________    Quality Counts #: ______________________
Name: ___________________________    Quality Counts #: ______________________
Name: ___________________________    Quality Counts #: ______________________
Name: ___________________________    Quality Counts #: ______________________

Phone: ___________________________    4-H Club: ____________________________

_____ 4-H Enrollment(s) Current
_____ School Eligibility Form(s) (due 7 days before show)
_____ Entry Form

Entry Form TOTAL: $__________
Processing Fee: $__________ ($5.00 per member entering)
Total Amount Due*: $__________

Please make payments payable to Hunt 4-H General Fund

For Office Use Only:
*Payment Type:    Check (Ck #:______ )    Money Order
                     Cash                      Debit Card ($1.00/$25.00)
Receipt #: _______    Received By: _______    Date Received: _______