



Bi-County Agreement for Transfer of 4-H Membership

County Transfer To: _____
(county where family wants to be 4-H member)

County Transfer From: _____
(county where family resides)

4-Her(s) wishing to transfer: _____

Reason for wishing to transfer: _____

As parent/guardian of the above listed children, I agree they would best be served by being allowed membership in the requested county's 4-H program. I understand this if for ALL 4-H activities and that these children may not be a member or participate in two county 4-H programs. I also agree to make every effort to keep them in this program for the duration of their involvement with 4-H.
County and State 4-H/FFA livestock shows have their own rules and should be checked to assure participation.

4-Her signature _____ printed _____

4-Her signature _____ printed _____

Parent / Guardian signature _____ printed _____
(or guardian)

Date _____

Extension agent signature where family resides _____

Date _____

Extension agent signature where family transferring _____

Date _____