## 2020 4-H Fall Ag Bag Registration

Complete separate registration form for each participant - scholarships available
Make checks payable to VCE - Westmoreland, \$50 fee will be charged for all returned checks
Return completed registration and payment to the Westmoreland Extension Office by mail or dropbox
18849 Kings Hwy, P.O. Box 8, Montross, VA 22520

Youth Name		First participant \$	5 □Additional participant \$3
Complete Mailing Address			
Parent Cell Phone		Parent Email Address	B
Youth Age Youth	Birthdate	Youth Gende	r
Youth Ethnicity - Please che	eck one _	Hispanic or Latino1	Not Hispanic or Latino
Youth Race - Please check	all that apply		
American Indian or Alaska Native		Asian	
Black or African American		Native Hawaiian or other Pacific Islander	
White		More than one race	•
If your child has any food a	llergies, please	write them here:	
impact sharing. Please check your a State University/College of Agricultu	Il be asked to take pagreement with the re and Life Science	photos of themselves during this pro following media release statement: s (CALS) periodically uses electronic	gram for future program promotion and The Virginia Polytechnic Institute and c and traditional media (e.g., knowledge receipt of this document and
give permission to the College of Ag	riculture and Life Sout further consider	ciences and its designee to use such ation from me. I understand that I w	n reproductions for educational and ill need to notify Virginia Tech/College of
Please mark one - Yes	s _	No	
Parent Signature			

If you are a person with a disability and desire any assistive devices, services or other accommodations to participate in this activity, please contact the Westmoreland Extension Office at 804-493-8924/TDD\* during business hours of 8 a.m. and 5 p.m. to discuss accommodations 5 days prior to the event. \*TDD number is (800) 828-1120.

