2018 COOPERATIVE YOUTH CONFERENCE APPLICATION

APPLICANT'S NAME: $PLEASE\ PRINT$

Mr. (); Miss ()					
ADDRESS:	City		Charles	7: C-1-	
STUDENT EMAIL:					
STUDENT CELL PHONE:					
PRIMARY PHONE:					L:
PARENT/GUARDIAN(S) N					
PARENT CELL PHONE: _					
PARENT EMAIL:					
T-SHIRT SIZE: Small	Medium	_ Large _	XL	2X	3X
WHAT COOPERATIVES Electric Membership C Farm Credit Services E Dairy Farmers of Ame Staple Cotton Coopera Maryland/Virginia Mil GEMC Federal Credit	Cooperative (EM Bank rica tive k Producers	(C)	Southern S Telephone Other Mar		eratives
SPONSORING COOPER. (co-op representative: also pleas		ottom of this	form)		
Name of Co-op and Contact	Person: Geor	gia 4-H: Sue	Chapman		
	th Annex, Athens,	GA 30602			
Telephone/email: 706-542	-4444	/ c	hapmans@u	ga.edu	

RECOMMENDATION:

The above applicant is of high moral character and demonstrates qualities of honesty and integrity in leadership. I recommend that this applicant be considered for selection to attend the Georgia Cooperative Youth Conference.

Signature of Person Recommending Nomination

AFFIDAVIT:

Knowing that any group or club is judged largely by the behavior of its individual members, I hereby pledge to conduct myself at this conference in a manner that would be a credit to the organization that I represent. I therefore apply for consideration to attend the Georgia Cooperative Youth Conference.

Signature of Youth

Note: Nominations should be submitted by June 20, 2018.

PLEASE RETURN FORM TO:

Georgia 4-H State Office c/o Dr. Sue Chapman 303 Hoke Smith Annex, UGA Athens, GA 30602-4356 Or email to <u>chapmans@uga.edu</u> Or fax to 706-542-4373

