

Wyoming 4-H Committee, Council or Group End of the Year Report

Name of Group:		Program Year:
learning in partnership with c	aring adults. In following with the	to reach their full potential, working and emission we highly suggest that all organized youth and adults working together.
	,	isory roles. and adults working together (preferred)
	ho serve as the primary certified	
Name:	Phone:	Email:
Chairman		I 4-H leaders or enrolled 4-H members):
Name:	Phone:	Email:
Vice Chairman Name:	Phone:	Email:
Secretary	-1	
Name:	Phone:	Email:
Treasurer		
	Phone:	Email:
Other		
Other Name:	Phone:	Email:
values of the Wyoming 4-H p experiences this past year tha		, 0
• • • • • • • • • • • • • • • • • • • •	icational Learning Activity	When?
Invited a speaker to the coun	2 /	April 12

Does your group / committee	plan to continue for the next 4-H year?	Yes	No
Meeting Information (for upco Proposed regular meeting time	oming year) e: Day of month:	_Time:	
Location where meetings norn	nally will be held:		
Who will serve as the leadersh or group leader yet please not	ip for your group for the upcoming year? I e that below.	f you have not elected a	a chairperson
Name:	Phone:	_Email:	
Name:	Phone:	_Email:	
Initial on each line, showing yo	ou have read and understand the statemer	its.	
All programs of UW groups must certify that members as a complete the Attachments to complete the Annual Secretary's Reparts A copy of your by-Oper	ort	youth in Wyoming. hts compliance. All 4-H t discriminate against al , handicap, or financial s	clubs or ny person for status.
We have read and understand	d the policies of the Wyoming 4-H program	n and the Charter Rene	wal process.
4-H Adult Volunteer Leader Si	gnature	Date	
4-H Youth (or Adult Volunteer	Leader) Signature	Date	

Please turn this form and the necessary attachments into your 4-H County Educator.