2017-18 4-H Healthy Living Ambassador Application

Name: ___________________________________________ What do you like to be called? _______________

E-mail Address: ________________________________ Cell Phone #: ___________________ Age: __________

Mailing Address: __________________________________________________________________________

Grade: _______ School: ________________________________________________________________

Check days during the school year when you are usually available after school.

Monday_______ Tuesday_______ Wednesday_______ Thursday_______ Friday_______

Check the weekend days when you are usually available: Saturday_______ Sunday _______

Shirt Size: (Adult) Small_______ Medium_______ Large_______ X-Large_______

Please describe other extracurricular activities you are involved in (sports, music, drama, etc):
____________________________________________________________________________________
____________________________________________________________________________________

Please check which topics interest you the most:

Sustainable Urban Agriculture_______ Cooking/Baking_______ Bee Keeping_______ Photography_______

Outdoor Adventures_______ Team Building_______ Farm Arts & Crafts_______ Screen printing _______

Have you been a 4-H Healthy Living Ambassador, Tucson Village Farm Camp Counselor in Training (CIT) or a 4-H Adventure Camp Jr. Counselor in the past? No_______ Yes_______ When: _________________________________________

Have you participated in a traditional 4-H Club in the past? No_______ Yes_______ Project________________ Year_______
Please describe any experience, training and successes you have had with public speaking:

_____________________________________________________________________________________

_____________________________________________________________________________________

Please describe your experience working with healthy living or sustainability issues in the past:

_____________________________________________________________________________________

_____________________________________________________________________________________

Why are you interested in becoming a 4-H Healthy Living Ambassador?

_____________________________________________________________________________________

_____________________________________________________________________________________

I understand that I am committing to participate for the entire 2017-18 school year which will include attending monthly meetings (October 2017 – April 2018), completing at least one project per semester and volunteering at least 10 hours per semester.

Applicant Signature ___________________________________________ Date __________________________

Parent/Guardian:

Parent/Guardian Name(s): _______________________________ _______________________________

Parent/Guardian E-mail: ________________________ Parent/Guardian Cell Phone #: __________________

I understand that my child will be participating in the 4-H Healthy Living Ambassador Program during the 2017-18 school year. I understand that my child will be asked to participate by attending monthly meetings (first Tuesday of the month from October 2017 – April 2018), completing at least one project per semester and volunteering at least 10 hours per semester.

I also agree to support my child in his/her club activities and healthy living and sustainability goals.

Parent/Guardian Signature ___________________________ Date __________________________

Do you want to be included in our communication (email or texting) with your child?

Cell: Yes ________ No ________ Email: Yes ________ No ________

Please email this application to Natalie Shepp, HLA Program Coordinator, nshepp@cals.arizona.edu or fax to 520-626-5849. Contact Natalie by phone at 520-349-3224 with questions. All applications must be received by September 22, 2017.