

First Year Goat Participant
Due: September 1st

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

4-H Club Name: _____

Email: _____

Qualifications:

1. Must be a first year 4-H'er in one of the Goat Department Projects.
2. One Junior (age 8 – 13) and one Senior (age 14 & older) to be selected.
3. A first year Goat Department member who DID NOT receive a first-place class placing.
4. Back of this form to be completed by 4-H member.
5. Will receive a \$50.00 check.



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1. Project Experience – List Goat Department project taken this year.
2. What did you learn from these project experiences?
3. What awards have you won as a 4-H member this year?
4. What offices and/or committees did you hold in your 4-H club this year?
5. How have you helped your club this year? i.e., community service, fundraisers, attended field trips, # of meetings attended, help with club booth.
6. List any special clinics or special educational meetings you have attended this year.