

**2009 Livestock Overnighter Registration Form**

**Deadline February 2, 2009**

Payment of \$5 per member and \$10 per parent plus Health Form must accompany this form.

Name: \_\_\_\_\_ Club: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Age as of 1/1/09 \_\_\_\_\_

Staying Overnight? \_\_\_Y \_\_\_N

Names of Parents Attending: \_\_\_\_\_

Is there anything we should be aware of about your child that is not covered on the 4-H Health Form?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of members at \$5 \_\_\_\_\_

Number of parents at \$10 \_\_\_\_\_

Total enclosed \$ \_\_\_\_\_

PLEASE MAKE CHECKS PAYABLE TO: KENT COUNTY 4-H LIVESTOCK COMMITTEE

**LIVESTOCK OVERNIGHTER ICE SKATING PERMISSION SLIP**

Name of 4-H'er \_\_\_\_\_

Parent Name \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

By signing this, I give permission for the 4-H'er attending the Livestock Overnighter to participate in ice skating at the Centre Ice Rink, Delaware State Fairgrounds, Harrington, Saturday, February 14, 2009.

**Mail Registration no later than February 2nd to:**

**Livestock Overnighter**

**Kent County Extension Office**

**69 Transportation Circle, Dover, DE 19901**