

4-H Volunteer Members for the District 10 4-H Food Show Awards Program

Each county can only submit one name plus one alternate to represent their county on the program. Fill out form and return it to the District Office by November 20, 2008. Selections will be made and 4-H'ers will be notified **by e-mail!!!**

Circle the part you would like to help with:

- | | |
|---|------------------------------------|
| Presiding | Explanation of Project Development |
| Motto and Pledge | Committee |
| Prayer | Presentation of Awards |
| Welcome | Presentation of Winners |
| Introduction of Guests | Closing Prayer |
| Food and Nutrition Program and Objectives | Closing Comments |
| | Ushers |

Name: _____

Address _____

City _____ Zip _____

Telephone () _____ Age _____

County _____ Email _____

Alternate Name: _____

Address _____

City _____ Zip _____

Telephone () _____ Age _____

County _____ Email _____

Fax (or mail) to the District Office by November 20 @: 830/278-4008

Agent Signature: _____