GUIDELINES FOR 4-H SPONSORSHIP

The Allegany County 4-H Sponsorship's primary purpose is to provide supplemental funds to assist active youth members and volunteers of Allegany County attending local, regional, and state workshops, camps, and other 4-H events.

Guidelines:

- 1. As sponsorships rely on specified donations, the number and amount for each event will depend on the funds available.
- 2. To apply for a sponsorship, participants must complete an application (attached). Applications are due to the Allegany County Extension Office two weeks before the registration deadline for the event.
- 3. With the approval of the Area Extension Director, the Extension Educator will grant all sponsorships.
- 4. \$20 is the minimum amount granted for each applicant. The amount may increase depending upon the number of applicants and funds available.
- 5. Applicants may not apply for more than two sponsorships within a calendar year.
- 6. The applicant will receive the sponsorship after attending the event and providing proof of full payment to the 4-H Office within 30 days following the event. Proof of full payment may be a canceled check or receipt from the agency/facility, which held the event. The sponsorship will be void if the recipient does not provide proof of payment within 30 days.
- 7. The Allegany County Scholarship Fund, Inc. committee will manage and administer funds as advised by the Allegany County 4-H faculty/staff.

University programs, activities, and facilities are available to all without regard to race, color, sex, gender identity or expression, sexual orientation, marital status, age, national origin, political affiliation, physical or mental disability, religion, protected veteran status, genetic information, personal appearance, or any other legally protected class.

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Allegany County 4-H Sponsorship Request

Name:		Age as of January 1 of current year:
Address	s:	(Members Only)
		Years as 4-H Member or Volunteer:
Event:		Date of Event:
Locatio	n of Event:	Cost:
	pace below, please summariz nt above: (Continue on back	ze into at least one paragraph why you would like to attend if needed.)
		Office Use Only
	Amount granted:	Date:

Educator Signature:_____