

**APPLICATION
YOUTH REPRESENTATIVE: 4-H LIVESTOCK ASSOCIATION BOARD**

Name _____ Age _____ Club _____

Address _____ City _____ Zip _____

Phone _____

Number of Years in 4-H _____ Number of Years in Livestock Projects _____

Species being raised this project year: _____
(Beef, Sheep, or Swine)

Please list leadership roles you have held

In your 4-H Club:

In your club's project group or in Livestock Association:

At the county level:

Briefly describe an idea(s) for a program or activity you would like included in this year's 4-H Livestock Association plans:

Return by October 15 to: UW-Extension
Ozaukee County Administration Center
PO Box 994
Port Washington, WI 53074