

**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 December 18 to: UW-Extension Ozaukee County

Ozaukee County Administration Center  
PO Box 994  
121 W. Main St.  
Port Washington, WI 53074