

OHIO STATE UNIVERSITY EXTENSION

Date Received:
Date Approved:

Clermont County 4-H Fundraising Request Form

Please complete this form **45 days** prior to your 4-H Club or Committee Fundraising Event. This form needs to be submitted to the OSU Extension Office for the 4-H Committee to review and approve. The committee meets on the second Monday of each month. Forms may be mailed, faxed, or emailed to: royalty.9@osu.edu.

Club or Committee Name:	Date	e:	
Volunteer in Charge of Fundraiser:			
Phone Number:	Email:		
Type of Fundraiser Planned:			—
Date(s) of Fundraiser:	Est. Income	e:	
Anticipated Use of Funds:			
Describe how the 4-H Name and Emb	lem will be used:		
Guidelines regarding emblem usage: https://clermont.osu.edu/sites/clermont/files/imce/Program_Page101	ges/4H/VoIApps/Using%20the%204H%20Name%	520and%20Emblem.pdf	
We are serving / preparing food at this	s event. Yes	No	
If yes, please list the adult volunteers that	at have received certificates in C	Occasional Quantity Cooks:	
(Materials may be obtained through the Extension	n Office)		
We have secured the appropriate hea	Ith permit(s), if serving food.	Yes □ No □	
We are using a facility that requires a	signed contractual agreemen	nt, and I have submitted the	
contract to the Extension Office to se (Note: You may not enter into contractual agreem the Ohio 4-H Program. Contracts must be submit	nents (sign contracts) with any entity or	Yes □ No □ n behalf of The Ohio State University	or
Please attach a copy of the event fly promote the event.	er and/or any other material	Is or communication used	to
Volunteer in Charge of Fundraiser Signature	4-H Extension Staff Signature	4-H Committee President	



