



Leader/Teacher Registration Form

The group leader/teacher must complete this form and return it to the county MSU Extension office.

Junior Master Gardener® Group Name _____

Unit/Club Number _____

Check (✓) preference Mr. Mrs. Ms. Dr.

Name _____
(Last) (First) (Middle Initial)

Mailing address _____

City/Town _____ Zip _____

Phone (____) _____ Work (____) _____ Male Adult

Email address _____ Female Youth

This information is requested to gather statistics for compliance with nondiscrimination requirements.

Check (✓) only one

- 1. American Indian or Alaska Native
- 2. Asian or Pacific Islander
- 3. Black – not of Hispanic origin
- 4. Hispanic
- 5. White – not of Hispanic origin

Residence

Check (✓) only one

- 1. Rural/Farm
- 2. Town less than 10,000
- 3. City between 10,000 and 50,000
- 4. Suburb of city more than 50,000
- 5. Central city more than 50,000

Major Leadership Responsibility

- 1. Club manager
- 2. Project leader
- 3. Activity leader
- 4. JMG volunteer (specify) _____

- 5. Other (specify) _____

Type of 4-H Unit

Check (✓) only one

- 1. Community
- 2. Project
- 3. School
- 4. Community Partnership
- 5. Clover Kids (K-2)
- 6. Special Interest
- 7. Curriculum Enrichment
- 8. Camping
- 9. ENP-Y

4-H Alumni? Yes No

State _____

County _____

Do you work directly with youth?

Yes No

Code Project Name

10089 Junior Master Gardener

Years as a 4-H leader

(including this year) _____

Signature	Date
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The terms, Junior Master Gardener, JMG, and Golden Ray Series, and associated logos, are service marks of the Texas Cooperative Extension.

Form 1041 (POD-07-18)

Distributed by **Jeff Wilson**, PhD, Regional Extension Specialist, Northeast Region.



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