

Livingston County 4-H Program

Installment Plan/Enrollment Waiver Request - 2019 Program Year

Cornell Cooperative Extension Livingston County actively affirms equality of program opportunities regardless of race, national origin, religion, disability, age, gender, sexual orientation, marital status, or financial hardship. Please select an option below, sign the bottom of the form and return to the CCE Office at the address above.

I _____ request an installment plan for the 2018 4-H enrollment fee of \$ _____. I will send (circle one) 2 3 monthly installments of \$ _____.

I _____ request an enrollment financial waiver to enroll my family or youth in the Livingston County 4-H Youth Development Program for the current program year and currently receive assistance from the County and/or School Lunch Program.

I understand that my family or youth will have the same rules, rights, responsibilities, and opportunities as all other enrolled 4-H members.

Name (printed) _____

Signature _____ Date _____

OFFICE USE ONLY

Payment Plan Approved

Payment Received: Date ___/___/___ \$ _____

Payment Received: Date ___/___/___ \$ _____

Payment Received: Date ___/___/___ \$ _____

Enrollment Fee Waived

Approved By: _____ Date ___/___/___

Notes:



Building Strong & Vibrant New York Communities

Cornell Cooperative Extension of Livingston County is an employer and educator recognized for valuing AA/EEO, Protected Veterans, and Individuals with Disabilities and provides equal employment and program opportunities.