



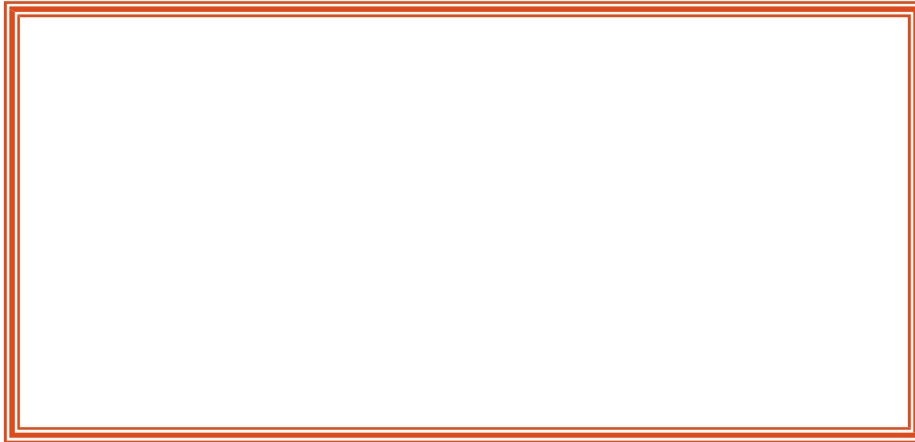
# My Clover Bud 4-H Project Book

Name:

Years in 4-H:

4-H Club:

Age:



*This is me!*

I want to be considered for COUNTY MEDALS in these projects:

Note: A maximum of 3 projects may be turned in per 4-H year for award recognition.

PROJECT

YEARS IN PROJECT

**This is a true record of my 4-H work for this year.**

Signed: \_\_\_\_\_  
4-H Club Member

\_\_\_\_\_  
4-H Parent

I have reviewed this record book: \_\_\_\_\_  
4-H Club Leader

*\*Please keep all pages of this document together (pages 1-9).*



# Clover Bud 4-H Participation Summary

Draw a picture of your favorite 4-H activity:



I like being a member of 4-H because: \_\_\_\_\_

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**4-H PLEDGE** I pledge my **HEAD** to clearer thinking,  
my **HEART** to greater loyalty,  
my **HANDS** to larger service,  
and my **HEALTH** to better living,  
for my club, my community,  
my country, and my world. 





## 4-H CLUB MEETINGS

In my 4-H Club I got to:

## 4-H ACTIVITIES

This year my favorite activities were:

This year I completed the following projects:



## DEMONSTRATIONS & EXHIBITS

Did you make a game board for the Fair, enter 4-H Exhibit Day, or do a demonstration in your club or at County Events? List all the exhibits & demonstrations you did in 4-H this year.

**CHECK**

**DID YOU DO A DEMONSTRATION?**

Title:

YES  NO

**DID YOU DO AN EXHIBIT?**

YES  NO

**WHAT WAS YOUR EXHIBIT?**

**DID YOU DO A GAMEBOARD?**

YES  NO

**WHAT WAS YOUR GAMEBOARD ABOUT?**



## OTHER 4-H ACTIVITIES

**Activity/Event:** This is where you may add your participation in activities that are NOT part of your completed projects. If you did things such as Club Camp Outs, Fashion Revue, Central Florida Fair activities, Poster & Photo Contests and they are NOT part of a completed project – list them below. DO NOT LIST THINGS THAT YOU ALREADY LISTED UNDER PROJECT ACTIVITIES.

**Level:** L = Club; C = County; D = District

| DATE                 | ACTIVITY      | LEVEL |
|----------------------|---------------|-------|
| Example:<br>09/09/15 | Share The Fun | C     |
|                      |               |       |
|                      |               |       |
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HERE ARE PICTURES OR DRAWINGS OF ME IN 4-H



April 2015 Extension programs are open to all regardless of race, color, creed or national origin. Persons with disabilities must contact the office at least 5 days prior to programs.



# RECORD FORM

This is a way for you to record the hours that you donate to 4-H and other groups. Service hours are non-paid hours that you give to benefit others.

**Level:** **L** = Club; **C** = County; **D** = District; **S** = State; **N** = Regional or National

**Type:** **Y** = you did it by yourself; **M** = you were a member of a group that did the activity;

**G** = you gave Leadership to the service activity.

| DATE | ACTIVITY | LEVEL | TYPE | # 4-H HOURS | # of NON 4-H HOURS |
|------|----------|-------|------|-------------|--------------------|
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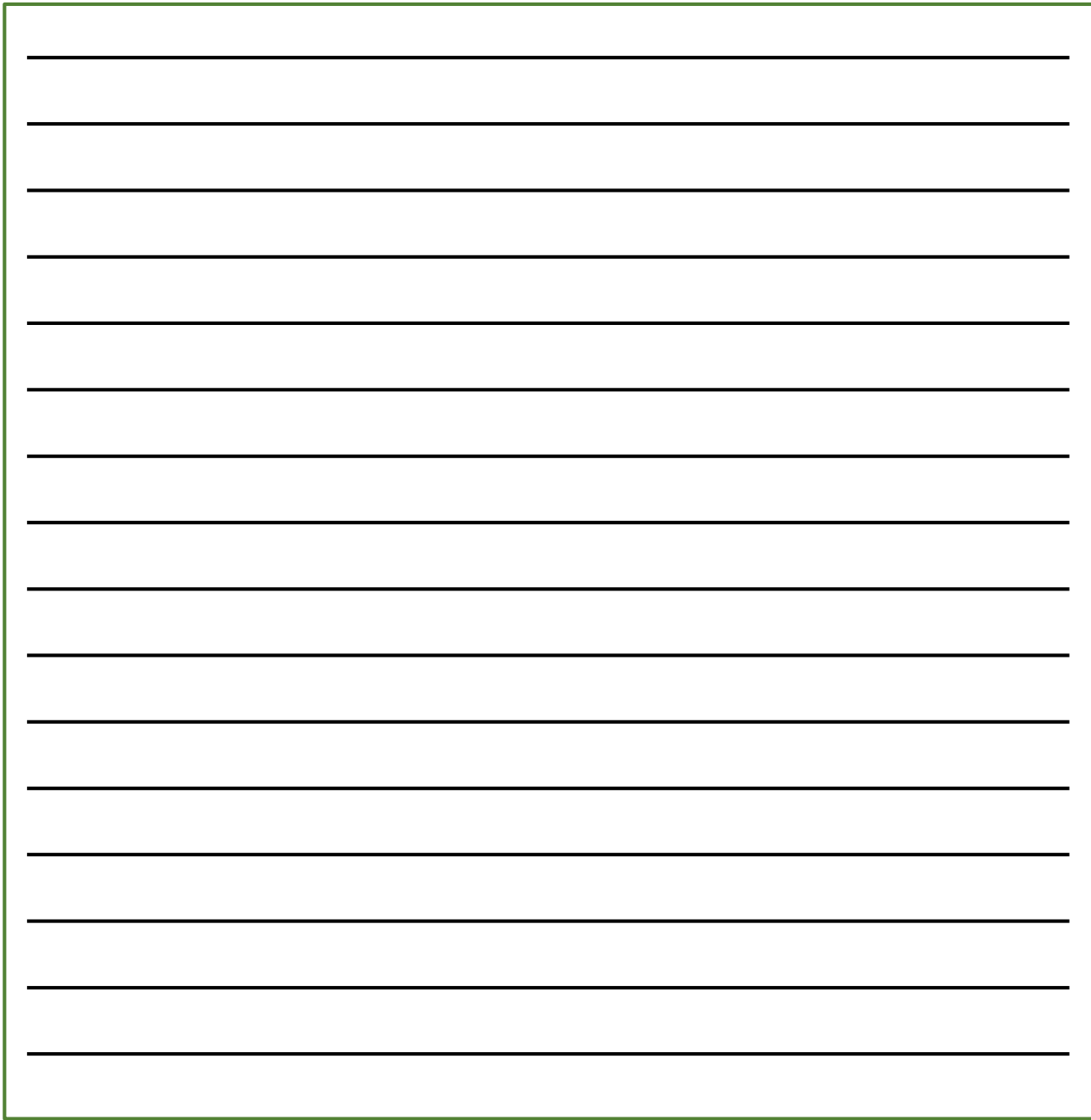






## YOUR 4-H STORY

Explain your full 4-H experience this past year. Describe your overall participation in your club related to your projects, special events, and competitions. In addition, include a paragraph about each of your 4-H projects, one paragraph per project. Please use complete sentences.

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4-H Story, continued

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