

**Request for Fiscal Support from Platte County 4-H Council
Submit at County Council meeting prior to the event**

Name: _____ Age: _____

Club: _____ Year in 4-H: _____

The event I wish to attend: _____

Location of the event: _____

Date of event: _____ Registration fee: _____

I understand the 4-H council will reimburse me after the event AND that I have to give a report at our club and/or council meeting.

The amount to be reimbursed is \$20 and then 20% of the remaining registration cost. I understand the council will also pay for the chaperone registration on a prorated basis.
A maximum of \$500 per event per person will be paid.

Date: _____

Member signature: _____

Parent signature: _____