

Today's Date \_\_\_\_\_

Birthday \_\_\_\_\_  
*(month and day ONLY)*

Dues... \$8.50 Check one: ____ Regular Member ____ Mailbox Member
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***Enrollment Form 2016  
For  
Butler County Extension Homemaker Association***

Name \_\_\_\_\_  
*(As you want your mail addressed)*

First Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Club Name \_\_\_\_\_ Phone: Home (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

Where do you live? (Check one)  
 On Farm     In country, but not farm     Town under 2,500     Town over 2,500

Age Group:  
 15-19     20-24     25-34     35-44  
 45-54     55-64     65-74     75+

Ethnic Background (*Optional – circle one*):  
White                  Black                  Hispanic                  Asian                  Other

Gender (please circle):                  Female                  Male

Number of years in club membership (*please check one*):  
 Less than 2 years                   2-5 years                   6-19 years  
 11-15 years                   16-20 years                   21-35 years  
 36-49 years                   50+

I, (*print full name*) \_\_\_\_\_, hereby grant permission to the University of Kentucky, including its affiliates and subsidiaries, and Kentucky Extension Homemakers Association, Inc., to interview, photograph, and/or videotape me; and/or to supervise any others who may do the interview, photography, and/or videotaping; and/or to use and/or permit others to use information from the aforementioned interview and/or the aforementioned images in educational and promotional activities and publications without compensation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The Kentucky Cooperative Extension Service is required by Federal law to collect and maintain information regarding the characteristics of the people we serve. The information you supply is voluntary.

*Educational programs of the Kentucky Cooperative Extension Service serve all people regardless of race, color, age, gender, religion, disability or national origin.*

(July 2006)