KENOSHA COUNTY 4-H

"Care to Share Form"

This form has been designed to help provide the Kenosha County 4-H program with valuable input. Once completed, this form will be distributed to the entire Kenosha County 4-H Council Board of Directors for their review. Please take a few moments and complete all three sections of this form. ***Forms without all three sections complete will be disregarded.***

SECTION #1: Describe the current situation:

SECTION #2: Describe the problem:

OVER

SECTION #3: Give your suggestion(s) for a possible solution:

_____
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Please Print:

Name of person completing form: _____

Address of person completing form: _____

Phone number of person completing form: _____

Signed: _____ Dated: _____

Please return completed forms to:

KENOSHA COUNTY 4-H
19600 75th Street
P.O. Box 550
Bristol, WI 53104-0550