



## MEMBER ACHIEVEMENT PLAN Clover Bud Pin

## **Application form**

Name		Age	4-H
Club/Group	County/District		<del></del>
you must attend a majority (more than one-ho	nclusion of the 4-H year in which you participat alf) of the remaining regularly scheduled meeti receive this pin only once, and you may receive	ngs of your club a	fter the poir
1. Number of meetings held:	Number of meetings attended:		
Signed:Clover Bud		Date	
Signed:		2440	
Parent/Guardian		Date	
Signed:			
4-H Leader		Date	
Signed:			
4-H Leader		Date	