Geauga County 4-H Cloverbud Award

Geauga County 4-H Cloverbud members are eligible for this county wide special recognition. The Geauga County 4-H Advisory Committee will recognize outstanding Cloverbuds at the yearly recognition ceremony. Only Cloverbud members, (age five and enrolled in kindergarten to age eight and not yet in the third grade by January 1 of the current 4-H year) are eligible to receive the award.

Completing the Record Sheet

- Document 4-H participation from Oct 1 – Sept 30
- Check all appropriate activities and provide the requested information
- Advisor must sign the completed award form. Signature verifies the Cloverbud’s participation in the activities indicated.

Cloverbud’s Name: ____________________________________________

Club: ____________________________ Years as a Cloverbud: _________

4-H Club Participation

- Attended club meetings. Number of meetings attended: _______
- Talked to club members about their projects
- Participated in a club community service project. List project: __________________________
- Helped with 4-H Club’s window display
- Helped with 4-H Club’s fundraiser activity
- Attended club recognition program
- Learned and recited the 4-H Pledge
- Learned and recited the 4-H Motto
- Assisted with set up for a meeting or Cloverbud activity
- Assisted with clean up from a meeting or Cloverbud activity
- Helped set up club booth at Jr. Fair
- Participated in a club event. Event(s): __________________________
- Other: _______________________________________________________________________
- Other: _______________________________________________________________________

County 4-H Activities

- Attended county recognition program
- Participated in county wide fundraiser.
- Attended Cloverbud Day Camp
- Participated in Public Speaking event
- Attended county wide field trip or educational event. List: __________________________
- Attended/participated in project judging
- Attended/participated in Quality Assurance/Horse Safety & Ethics
- Other: _______________________________________________________________________
- Other: _______________________________________________________________________

Advisors Signature: ____________________________ Date: ________________