

NC 4-H Horse Program Steward Application

Date: _____

Name: _____ County: _____

Mailing Address: _____

Town

Zip Code

Phone Number: Home (evening): _____

Work (day): _____

Cell: _____

Email Address: _____

Number of years as a recognized 4-H Horse Program volunteer leader:
(applicant must have been a 4-H Horse Program member for the past 3 years) _____

Are you certified in equine measurement by the NC 4-H Horse Program?

Yes ____ No ____

Why do you want to be a 4-H Horse Program Steward?

A completed application must include a letter of reference from your county extension agent verifying your volunteer leader eligibility and knowledge of the 4-H Horse Program.