Default Question Block

Welcome to the Online Pre-Registration Site for 48 Hours of 4-H! Thank you for your interest in this Kansas 4-H Service Challenge.

Organization Information

Name of 4-H Club or Group

Extension Region - If you are not sure, its ok to guess!

- Northeast
- Northwest
- Southeast
- Southwest

County/District			
Click to write Choice 1			~
Adult Contact			
Phone Number			
Mailing Address - Exampl	e Format: 22 N Clo	over, Green KS 444	44
Email Address			

Please Email Updates about 48 Hours of 4-H
O Yes
O No
Optional Additional Contact Person
Optional Additional Contact Person Phone Number
Optional Additional Contact Person Email Address
Drainet Detaile
Project Details
Name of Project

Date(s) of 484H Project - Official event dates are October 7-8, 2023 we realize some projects will be planned for other days to find your group/community schedule.
Physical Location of the Project (Address, City, ST, Zip)
Project Start Time
Project End Time (estimated)
Number of youth, adult volunteers, and alumni expected to assist with the project.

Type of Service Project-May be more than one

	Collection/Donation - Food
	Collection/Donation - Other
	Educational Event
	Benefit/Cause
	Cleanup/Beautification
	Appreciation Event
	Other
	nission for the 48 Hours of 4-H Sponsoring Groups to promote the project to
	nedia if that opportunity presents itself.
	Allow
()	Don't Allow
	ide a brief description that would help us understand the project's purpose what your group will be doing.

We are so excited you are taking part in 48 Hours of 4-H Service Challenge this year! We hope you will INVITE potential 4-H Members and their families and 4-H Alumni to join you. Thanks for registering your project!

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