



Doña Ana County 4-H



RECORD BOOK WAIVER

Please fill out the statement(s) that best describe your situation.

The 4-H youth member _____ (member's name) is unable to print or type his/her own record book due to physical or other impairment/deficiency.

I _____ (parent's name) certify that I have completed this record book for _____ (member's name) using his/her own words and experiences.

OR

My son/daughter _____ (member's name) has completed their own record book. Please be aware that he/she has the following impairment/disability: _____

Parent signature Date

4-H Agent signature Approval Date