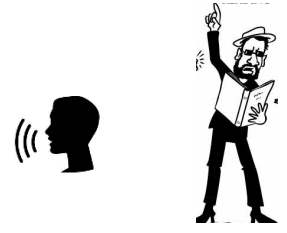


**SPEAKING / INTERPRETIVE READING REGISTRATION FORM (one per person)**

Name: \_\_\_\_\_  
Address / City: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
4-H Club: \_\_\_\_\_  
Title: \_\_\_\_\_



**Division:**      \_\_\_\_\_ Speech      \_\_\_\_\_ Interpretive Reading      \_\_\_\_\_ Any Other Speaking Category

**Category:**      \_\_\_\_\_ Cloverbud      \_\_\_\_\_ Explorer  
                         \_\_\_\_\_ Junior      \_\_\_\_\_ Intermediate      \_\_\_\_\_ Senior

**STORYTELLING REGISTRATION FORM (one per person)**

Name: \_\_\_\_\_  
Address / City: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
4-H Club: \_\_\_\_\_  
Title: \_\_\_\_\_



**Category:**      \_\_\_\_\_ Cloverbud      \_\_\_\_\_ Explorer  
                         \_\_\_\_\_ Junior      \_\_\_\_\_ Intermediate      \_\_\_\_\_ Senior

**DYNAMIC DUO REGISTRATION FORM (one per team)**

Name: \_\_\_\_\_  
Address / City: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
4-H Club: \_\_\_\_\_  
Title: \_\_\_\_\_



**Category:**      \_\_\_\_\_ Cloverbud      \_\_\_\_\_ Explorer  
                         \_\_\_\_\_ Junior      \_\_\_\_\_ Intermediate      \_\_\_\_\_ Senior

**DEMONSTRATION REGISTRATION FORM (one per person/team)**

Name: \_\_\_\_\_  
Address / City: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
4-H Club: \_\_\_\_\_  
Title: \_\_\_\_\_



**Check One:**      \_\_\_\_\_ Individual      \_\_\_\_\_ Team

**Category:**      \_\_\_\_\_ Cloverbud      \_\_\_\_\_ Explorer  
                         \_\_\_\_\_ Junior      \_\_\_\_\_ Intermediate      \_\_\_\_\_ Senior

Registrations due 2 weeks before event to:

Extension – Clark County Office  
Speaking and Demonstration Contest  
517 Court Street, Room 104  
Neillsville, WI 54456