

Fall 4-H pin order form

All Action Awards 528 Bush Street Woodland, CA 95695
530-666-3220 fax 530-666-0640 karen@allactionawards.com



Custom pins available (minimum 100)
Please contact us for further information

County _____

Order due date November 13, 2020

Beginning Food Preservation:

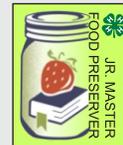
Complete at least 6 hours of project work learning about safe home food preservation techniques, specific project completion requirements determined by the project leader



Beginning Food Preservation pins number needed: _____

Jr. Master Food Preserver: Pilot Counties ONLY

Pre-requisite: Beginning Food Preservation pin previously earned. Projects are under the direction of at least one Master Food Preserver. Youth must complete the project, pass a certification exam and complete five hours of service to become a Certified Jr. Master Food Preserver and receive a pin.



Jr. Master Food Preserver pins number needed: _____

\$2.75 each

Yearly Achievement Pins

Also known as the completion or participation pin, this pin recognizes members for successful completion of 4-H work. Pins are given to youth members who complete their 4-H work in the 4-H Youth Development Program. Each 4-H Club may determine what constitutes "completion" with approval from the county office.



Primary member pins
5-8 years old
number needed: _____



Junior member pins
9-10 years old
number needed: _____



Intermediate member pins
11-13 years old
number needed: _____

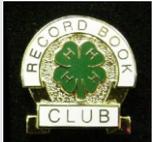


Senior member pins
14-19 years old
number needed: _____

\$1.65 each



Record Book County pins
number needed: _____



Record Book Club pins
number needed: _____



County Ambassador pins
number needed: _____

\$2.45 each



OFFICER number needed _____



PRESIDENT number needed _____



VICE PRESIDENT number needed _____



SECRETARY number needed _____



TREASURER number needed _____

Officer Pins



REPORTER number needed _____



SERGEANT AT ARMS number needed _____



HISTORIAN number needed _____



HEALTHY LIVING number needed _____

\$2.75 each

If being ordered by and billed to a county 4-H office:

County Name _____ Contact Person _____

Phone Number _____ Email Address _____

If being ordered by a leader or parent and not being billed to a county 4-H office please call in with a credit card number. Orders must be prepaid before they can be shipped.

Name: _____ Phone Number: _____

Email Address: _____

Shipping Address (cannot ship to PO Boxes) **Is this a residential address?** Yes ___ No _____

Billing Address (for county billing only if different than shipping address) _____
