

Homemaker Enrollment

Please complete and return this form to the Shelby County Cooperative Extension Office to become a Shelby County Homemaker or to retain membership. You may mail this form to:
Shelby County Extension Office, c/o Homemakers, 1117 Frankfort Road, Shelbyville KY 40065.
Make checks payable to Shelby County Homemakers.

Each year you must re-enroll to continue being a Homemaker Member.
Benefits include regular Homemaker news about upcoming events and programs, opportunities for meeting others who have similar interests, lifelong learning and having fun!

Name: _____

New members and those who have moved within the last year, please provide below:

Address, City, State & Zip: _____

Email: _____ Phone: _____

Name of Club(s) you regularly participate in - or Member At Large

- | | | |
|---|--|---|
| <input type="checkbox"/> Give Back Gals | <input type="checkbox"/> Bingo | <input type="checkbox"/> Cover Lovers |
| <input type="checkbox"/> Fun Loving Fillies | <input type="checkbox"/> Book | <input type="checkbox"/> Plate It Up! Cooking |
| <input type="checkbox"/> Milestone Quilters | <input type="checkbox"/> Hempridge | <input type="checkbox"/> Crafts and Giggles |
| | <input type="checkbox"/> Sewing with Linda | <input type="checkbox"/> Lunch Bunch |

How would you prefer your mailings?

Mail Carrier/Delivery E-Mail NO MAIL

The Kentucky Cooperative Extension Service is required by Federal law to collect and maintain information regarding the characteristics of the people we serve. The information you supply is voluntary.

Birth Month & Year: _____

Race: White Black Asian/Pacific Islander American Indian or Alaska Native

Ethnicity: Hispanic Non-Hispanic Gender: Female Male

- PLEASE COMPLETE THE OTHER SIDE -

Cooperative Extension Service
Agriculture and Natural Resources
Family and Consumer Sciences
4-H Youth Development
Community and Economic Development

Educational programs of Kentucky Cooperative Extension serve all people regardless of economic or social status and will not discriminate on the basis of race, color, ethnic origin, national origin, creed, religion, political belief, sex, sexual orientation, gender identity, gender expression, pregnancy, marital status, genetic information, age, veteran status, or physical or mental disability. University of Kentucky, Kentucky State University, U.S. Department of Agriculture, and Kentucky Counties, Cooperating.
LEXINGTON, KY 40546



Disabilities
accommodated
with prior notification.

Photography Permission request...

Photography/Media Permission Form

I, (print full name) _____ hereby grant permission to the University of Kentucky, including its affiliates and subsidiaries, and Kentucky Extension Homemakers Association, Inc., to interview, photograph, and/or videotape me; and/or to supervise any others who may do the interview, photography, and/or videotaping; and/or to use and/or permit others to use information from the aforementioned interview and/or the aforementioned images in educational and promotional activities and publications without compensation.

Signature: _____ Date: _____

Educational programs of the Kentucky Cooperative Extension Service serve all people regardless of race, color, age, gender, religion, disability, or national origin.

Dues for membership are \$8.00. Please make checks payable to the Shelby County Homemakers and mail or drop off to 1117 Frankfort Road, Shelbyville, KY 40065 before November 1st of each year. *Also, please consider a \$1.00 (or more) donation to the Ovarian Cancer Research fund.*

OFFICE USE ONLY:

Paid at Extension/Club

Homemaker Handbook

Entered in Database