

Homemaker Enrollment

Please complete and return this form to the Henry County Cooperative Extension Office to become a Henry County Homemaker or to retain membership. You may mail this form to:

Henry County Extension Office, c/o Homemakers, PO Box 246 New Castle, Kentucky 40050

Make checks payable to Henry County Homemakers.

Each year you must re-enroll to continue being a Homemaker Member.

Enrollments are due NO LATER THAN DECEMBER 5, 2023

for the August 2022 to July 2023 membership year

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:

- | | | |
|-------------------------------------------------|-----------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Country Ladies | <input type="checkbox"/> Make & Mend | <input type="checkbox"/> Living Well |
| <input type="checkbox"/> Homemakers in Progress | <input type="checkbox"/> Town & Country | <input type="checkbox"/> Mailbox Member |
| <input type="checkbox"/> Jericho | <input type="checkbox"/> Book Club | |

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 Henry County Homemakers and mail to P.O. Box 246 New Castle, Kentucky 40050. You may also drop off at the Henry County Cooperative Extension Service or make arrangements within your club to turn in before December 5, 2022.