



FLATHEAD COUNTY HORSE COMMITTEE SCHOLARSHIP FORM

Name: _____ Age: _____ Years in 4H: _____

Address: _____

Phone: _____ Club: _____

4H Horse Projects: _____

Cost of Clinic/Seminar/Trip: _____

Please answer the following questions-

How would this clinic/seminar/event better your horsemanship?

How will you utilize this information to help your horse project?

What are two goals you would like to attain by attending this clinic/seminar/event?

1.

2.

It is expected that if you are gifted funds, you will need to provide a thank you and have an active role in giving back to the 4H community in volunteering with another clinic, your club 4H horse program, or any fundraising event the Horse Committee puts on. A member may receive \$100 towards the State 4H horse shows and \$50 towards a clinic/seminar/event once in a single year.

Please return form or direct questions to Flathead County Horse Committee at extension@flathead.mt.gov.