

## **Parent/Guardian Comment**



Completion of this section is required.

I certify that I have completed this record book on my own. My parent/guardian may have assisted me, but they did not complete any section of this book for me.

| Member Signature:  | Date: |
|--|-------|
| Parent/Guardian Signature:   | Date: |
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| Completion of this section is optional.  |       |
| Parent/Guardian: Please comment on how you feel about your child's participation in 4-H this year. |       |
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