

2021 PBS Animal Health Stores 4-H/FFA Program

Member Name: _____ Age: _____
Phone Number: _____ Email: _____
Address: _____ City: _____
Parent's Name: _____ County: _____
4-H Club/FFA Chapter: _____
4-H Club/FFA Chapter Advisor: _____
Advisor Contact Number: _____

What projects are you taking in 4-H/FFA?

Terms and Conditions:

1. Program is effective January 1, 2021 through December 31, 2021.
2. All items for project use will be given a 5% discount.
3. The 4-H Club/FFA Chapter with the largest member participation and purchases will earn a prize from the PBS Animal Health Store in their area.
4. To be eligible for this program the entire form MUST be filled out and signed by member and parent.
5. Members MUST be present to get discount.

_____ Member Signature

_____ Parent Signature (if member is under 18)

_____ Date

**PBS Animal Health Stores (Circleville, Massillon, St. Henry, Wilmington & Wooster) reserve the right to change the program at any time with notice.

January 2021