SOUTHEASTERN YOUTH FAIR AMBASSADOR PROGRAM 2024-2025

PLEASE PRINT

Name:				Ag	e:		
Mailing Address:							
City:	FL ZIP:	Email Addres	s:				
Home Phone:	Cell Phone:						
Parent/Guardian Nan	ne:	1	Phone:				
School:		Current Gra	ade:				
4-H Club:		FF	FFA Chapter:				
Offices Held:							
List the projects/ever	nts you intend to	participate in at the u l	pcoming South	eastern Youth F	air:		
Returning Ambassado	or: Yes or NO	Number of Years in:	4-H	FFA	SEYF		
□ New Ambas Two let Copy o List the List 4H List oth Describ	sadors: Copy of sadors Only: ters of recomme f most recent reperture and/or FFA activates you be the skills and		rd ated in at the SE been involved with during the will make you a	YF. in outside the S year. n effective Amb	passador.		
		in the Southeastern Yout listed in the current SEYF					
Exhibitor's Signature	!			Date:			
by all the rules and reg	ulations as listed in	pate in the Southeastern Y In the current SEYF Rules a Id follows all the rules and	nd Regulations po	sted on the webs	ite. I understand that it		
Parent's Signature: _				Date:			
This applicant is currer	ntly a member in g	ood standing of my FFA C	hapter/4-H Club.				
Advisor/Leader Signature:				Date:			

New Ambassadors Only

New ambassadors must complete this page. Attach additional pages, if needed.

List of SEYF projects	and events you ha	ave participate	d in:		
List 4H and/or FFA a	ctivities/projects	you have been	involved in out	side of the SEYF:	
List other activities/	community service	e vou are curre	ntly involved w	ith during the ve	arı
	community service	you are carre	nery mirorived in	in during the yea	
Describe the skills ar	nd qualities you ha	eve that will se	rve to make you	u an effective am	bassador: