



# FCS FINANCIAL

Growing Relationships. Creating Opportunities.™

A FARM CREDIT COOPERATIVE

## 4-H and FFA Ag Youth Program Agreement

To qualify for funds to participate in FCS Financial's Ag Youth Program, this Agreement must be completed, signed and returned to FCS Financial for approval with a detailed projected cash flow statement and Information/Photo Use Authorization form.

### A. PARTICIPANT INFORMATION

Participant \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email Address \_\_\_\_\_ Cell Number \_\_\_\_\_  
School \_\_\_\_\_ Grade in School \_\_\_\_\_

### B. PARENT/LEGAL GUARDIAN INFORMATION

Parent/Guardian \_\_\_\_\_ Occupation \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email Address \_\_\_\_\_ Home Number \_\_\_\_\_  
Cell Number \_\_\_\_\_ Work Number \_\_\_\_\_  
Preference for Notification (Please check one):  Phone  Email  Letter

### C. LEADER/ADVISOR INFORMATION

Leader/Advisor \_\_\_\_\_ Club/Chapter \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email Address \_\_\_\_\_ Office Number \_\_\_\_\_  
Cell Number \_\_\_\_\_  
Preference for Notification (Please check one):  Phone  Email  Letter  
Comments \_\_\_\_\_

### D. PROJECT INFORMATION

**PLEASE SELECT PROJECT TYPE:**

- |  |   |
|--|---|
| <input type="checkbox"/> Cattle (\$2,000 max.)       | <input type="checkbox"/> Rabbits (\$250 max.) |
| <input type="checkbox"/> Goats (\$1,000 max.)        | <input type="checkbox"/> Sheep (\$1,000 max.) |
| <input type="checkbox"/> Horticulture (\$2,000 max.) | <input type="checkbox"/> Shop (\$2,000 max.)  |
| <input type="checkbox"/> Poultry (\$500 max.)        | <input type="checkbox"/> Swine (\$1,000 max.) |

### E. ESTIMATED PROJECT BUDGET

Estimated Income	\$ _____
Estimated Expenses	\$ _____
Estimated Net Income	\$ _____
<i>(Income minus Expenses)</i>	

*Attach detailed projected cash flow statement.*



I hereby apply for FCS Financial Ag Youth Program funds in the amount of \$\_\_\_\_\_ to be used for my 4-H or FFA project and to be repaid on \_\_\_\_\_. In order to facilitate approval of my request, I agree to the following terms as follows:

- 1. Enrollment Certification. I hereby certify that I am a current 4-H or FFA member in a county serviced by FCS Financial.
2. Project Information. To be eligible for funding, the project must be one of the types found in Section D on the application.
3. Use Advance for Project. To use the advance for the project specified. Additional information will be shared with the student and their parent or guardian on how to access funds if the funding request is approved.
4. Care for the Animal, Land, Inspection. To practice good stewardship for all farm activities including but not limited to caring for animal(s) in accordance with good and acceptable agricultural practices and caring for the land in a manner that preserves its integrity for future generations.
5. Remit Proceeds and Final Cash Flow Statement. Remit the proceeds received from the specified project to FCS Financial in an amount equal to the amount advanced to me by repayment date specified above but no later than within 12 months of agreement.
6. Notify FCS Financial of Changes in Plan. To notify FCS Financial within 10 business days of any material changes in Project Information.
7. Project Books and Records. To keep good, accurate and complete project records and to turn in such books and records to FCS Financial for inspection at its request.
8. GPA Certification. I hereby certify that I currently have and pledge to maintain a GPA of no less than 2.0.
9. Information and Photo Use Authorization. Authorize FCS Financial to use participant information and photo in marketing materials including but not limited to use in brochures, website, advertising and other FCS Financial publications.
10. Information Certified. I hereby certify that the information contained above is true, complete and accurate as of the date I have signed this Application. I understand that I am only allowed one outstanding project advance at a time and the amount is based on total expenses listed on my projected cash flow not to exceed the maximum shown for my Project Type under Project Information.

IN SIGNING THIS APPLICATION, ALL PARTIES SIGNING BELOW AGREE TO THE TERMS AND CONDITIONS STIPULATED ABOVE.

In witness whereof, I have signed this Application/Agreement on \_\_\_\_\_ (Date)

Participant \_\_\_\_\_

PARENT/GUARDIAN CERTIFICATION:

I hereby certify that I am aware of and have approved the project described on the Application/Agreement and will reimburse FCS Financial for the amount of the advance if the participant does not. I agree to assist FCS Financial in obtaining participant's project book for inspection and to facilitate any inspection of the project.

Parent \_\_\_\_\_

LEADER/ADVISOR CERTIFICATION and Agreement:

I certify as follows: I am an authorized advisor of the above-mentioned 4-H Club/FFA Chapter (Section C). The above-referenced student is a member in good standing of the 4-H Club/FFA Chapter specified above and that I am aware of the proposed project. I agree to assist FCS Financial in obtaining the student's project book for inspection and facilitate any inspection of the project. I agree to cooperate with FCS Financial in obtaining proceeds from the project.

Leader/Advisor \_\_\_\_\_

ACCEPTANCE:

FCS Financial hereby approves the application: \_\_\_\_\_ (Financial Services Officer) \_\_\_\_\_ (Date)