

## 4-H Food Stand Family Preference Sheet



Please return this form to the Extension Office no later than JUNE 1st.

| Family Name:                    |  |                     |
|---------------------------------|--|---------------------|
| Number of Adults working:       |  |                     |
| Number of children working b    |  |                     |
| _                               | etween ages 10-13:                                     |                     |
|                                 | etween ages 14-18:                                     |                     |
|                                 |  |                     |
| Club Name:                      |  |                     |
| E/                              | ACH FAMILY IS REQUIRED TO SEL<br>A NIGHT SHIFT OPTION! | ECT                 |
| Choices:                        |  |                     |
| Tuesday:                        | 9:00am – 4:15pm  | 3:45pm – 11:00pm    |
| Wednesday:                      | 9:00am – 4:15pm  | 3:45pm – 11:00pm    |
| Thursday:                       | 9:00am – 4:15pm  | 3:45pm – 11:00pm    |
| Friday:                         | 9:00am – 3:00pm  |                     |
|                                 |  |                     |
| Please rank your shift choices: |  |                     |
| 1 <sup>st</sup> Choice:         |  |                     |
| 2 <sup>nd</sup> Choice:         |  |                     |
| 3 <sup>rd</sup> Choice:         |  |                     |
|                                 |  |                     |
| ***Dlagga list or               | nly two shifts that will <b>NOT</b> work f             | for your family *** |
| Please list of                  | ny two shirts that will <b>NOT</b> work i              | or your fairling.   |
| This shift will not work:       |  |                     |
|                                 |  |                     |