

4-H loan application

Complete this Application and drop it off at your local ATB Financial Branch



Tell us about the project:

- Livestock Horse Small animals Technology and trade
 Life skills Environmental sustainability Creative options

Brief summary of the Applicant's proposed 4-H project (attach business profile or plan upon request of ATB Financial):

Amount of 4-H Loan for which this Application is made (maximum \$5,000 total 4-H loans per Applicant): \$

Tell us about yourself ("Applicant")

First name Initial(s) Last name Date of birth 4-H Membership number
MM DD YY
 Home address City/town Province Postal code Home phone
() -

Tell us about your 4-H club

Club name Club region Name of leader
 Club address City/town Province Postal code

Project approval

I have reviewed the Applicant's proposed 4-H project and certify that it meets the guidelines of 4-H (Alberta)

MM DD YY
 Signature of leader Date

Co-Applicant

First name Initial(s) Last name Home phone
() -
 Home address City/town Province Postal code

Agreements and signatures

By signing this Application, the Applicant and Co-Applicant: (a) apply for an ATB Financial 4-H Loan; (b) represent that all information supplied in this Application and any further information supplied to Alberta Treasury Branches ("ATB Financial") is complete and correct both within the Application process and continuing throughout the term of any 4-H Loan granted including, without restriction: (i) the Applicant is a member in good standing of 4-H (Alberta), (ii) the Co-Applicant is a parent or guardian of the Applicant, (iii) the subject 4-H Project is approved by the Applicant's 4-H Club General Leader, Assistant General Leader or Project Leader (each, a "Leader"), and (iv) confirm you are not in active bankruptcy nor have been bankrupt over the past seven years and; (v) acknowledge that ATB Financial is relying upon the information provided in this Loan Application to approve (or decline) our 4-H Loan and, if your Loan Application is approved, maintaining your 4-H Loan.

MM DD YY
 Signature of Applicant Date

MM DD YY
 Signature of Co-Applicant Date

For ATB Financial internal use only

Approved Declined

Date Name and title of ATB Financial representative Signature of ATB Financial representative
MM DD YY

Transit #