



INDIANA EXTENSION HOMEMAKERS ASSOCIATION

HOST-A-HOOSIER

July 1, 20____ through June 30, 20____

This is a one-year program – No reporting necessary.

FORM DUE APRIL 15

Application for _____ County

Contact Person (this should be a county officer):

Name _____

Address _____

City & Zip Code _____

Phone Number _____ cell/ home

E-mail _____

How far are you willing to travel? _____ miles

Will you stay overnight if invited? YES NO

Will you invite your guest(s) to stay overnight? YES NO

Send completed form to the current Host-A-Hoosier Chair listed in the IEHA Directory.