

Elk County 4-H Foods & Nutrition Record

Year _____

Name _____ Age (Jan 1) _____ Yrs in Project _____

Club _____

Learning Activities in this Project (indicate number of times participated)

Type of Activity	L = Local	C = County	D = District	S = State
Field Trip/Tour				
Talks/Demonstrations				
Project Meetings Attended				
Total Number of Exhibits				

List any **Leadership** you provided during this year. List what you did, when and with whom.

After completing this project, how have you changed to make healthy food choices?

Food Preparation Summary -- List all food prepared and the amount and put a check in the appropriate food group. Add additional pages if needed.

FOOD GROUPS

Food (Example:)	Amount	FOOD GROUPS						Times Made
		Bread, Cereal, Rice, Pasta	Fruit	Vegetable	Milk, Yogurt, Cheese	Meat, Poultry, Fish, Beans, Eggs, Nuts	Fats, Oils, Sweets	
Whole Wheat Muffins	5 dozen	X						111

Foods & Nutrition Project Story:

Member Signature

Leader or Parent Signature

