GOAT

WASHINGTON COUNTY IDENTIFICATION SHEET (WC 2.2023)

DEADLINE: JUNE 15

Household Last Name: _____ **4-Her First name(s):** _____ _____

_____ _____

4-H Club

PREMISE ID #: _____ _____

YQCA Certificate #: _____ _____

Market Goat	Breeding Goat	BREED	SEX (M/F)	DATE Born MM/DD/YYYY	SCRAPIES TAG REQUIRED Example: NE-1234	EAR TAG L  R POSITION	ADDITIONAL INFORMATION	State Fair Nomination

Mailing Address: _____

Phone Number: _____

Duplicate Address: _____

Duplicate Phone Number: _____

4-H STAFF USE ONLY:

Date Received: ____ /____ /____ Initials: _____

Enrollment complete (June 15): _____ Initials: _____

YQCA completed (June 15): _____ Initials: _____

Pictures Attached (June 15): _____ Initials: _____

4-H Staff Signature: _____

Signature of ALL 4-H members: _____ _____ _____ _____

Signature of Parent/Guardian: _____