



SHEEP

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 Sheep	Breeding Sheep	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: _____