




MARKET GOAT

DOUGLAS-SARPY COUNTIES IDENTIFICATION SHEET

DEADLINE: JUNE 15

Last Name: _____ First name(s): _____ Age (Jan 1): _____
PREMISE ID #: _____ Age (Jan 1): _____ 4-H Club _____
Age (Jan 1): _____
Age (Jan 1): _____

MAXIMUM OF 20 HEAD PER MEMBER

BREED/DESCRIPTION	SEX (M/F)	OFFICIAL USDA SCRAPIES TAG <i>EX: NE1234-5678</i> REQUIRED	R  L CIRCLE "RIGHT" or "LEFT"	ADDITIONAL INFORMATION
			RIGHT LEFT	
			RIGHT LEFT	
			RIGHT LEFT	
			RIGHT LEFT	
			RIGHT LEFT	
			RIGHT LEFT	
			RIGHT LEFT	
			RIGHT LEFT	
			RIGHT LEFT	
			RIGHT LEFT	

Mailing Address: _____
Email Address 1: _____
Email Address 2: _____
Phone # 1: _____
Phone # 2: _____

4-H STAFF USE ONLY:

Date Received: ____ / ____ / ____ Initials: ____
Enrollment complete (June 15): ____ Initials: ____
YQCA completed (June 15): ____ Initials: ____
4-H Staff Signature: _____

Signature of ALL 4-H members: _____
Signature of Parent/Guardian: _____