













# FRANKLIN COUNTY 4-H and FFA MARKET SWINE OWNERSHIP AFFIDAVIT

Premise ID # (Mandatory)

Last Name	First Name (4-H Age)	4-H Club Name
Last Name	First Name (4-H Age)	4-H Club Name
Last Name	First Name (4-H Age)	4-H Club Name

County Only		State Fair AkSarBen DNA		Notches				County Only		State Fair AkSarBen DNA		Notches			
County Only	State Fair AkSarBen DNA	Right Ear	Left Ear	Right Ear	Left Ear	Sex	4-H/FFA EID TAG	County Only	State Fair AkSarBen DNA	Right Ear	Left Ear	Right Ear	Left Ear	Sex	4-H/FFA EID TAG
															
															
															
															
															

*\*Electronic signatures acceptable. Type your full name.*

Signature of Club or Chapter Member(s)  
(At least one of those listed at the top of this form must sign.)

Signature of Parent and Address

Date \_\_\_\_\_

Phone \_\_\_\_\_