



Last Name _____ First Name(s) and 4-H Age(s) _____ 4-H Club | FFA Chapter Name _____ County _____
 YQCA# _____ Premise ID# _____

NEBRASKA 4-H | FFA BREEDING SHEEP OWNERSHIP AFFIDAVIT Rev. 1/20)

✓if Return Animal	Sex	Breed or Breeds Involved	Date Born (month/year)	Full Scrapie Ear Tag Number	Tattoo	✓if State Fair Animal	State Fair Validation Number	Name & Registration Number of Project Animal	Additional Notes

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

 Phone _____

This (these) youth has (have) submitted this livestock ownership affidavit-in-accordance-with-all-rules-of-the-state,-county-and-Chapter-4-H or FFA Program and also has (have) successfully completed a Food Animal Quality Assurance program/test for this period.
 Date _____