



4-H HORSE IDENTIFICATION CERTIFICATE

Year _____ County _____

Member's Name _____ Address _____ Age Jan. 1, 20 ____

Name of other Member if a Joint Project _____ Address _____

Phone _____ E-mail _____ Club Name _____ Approved County Extension Educator _____ Date _____

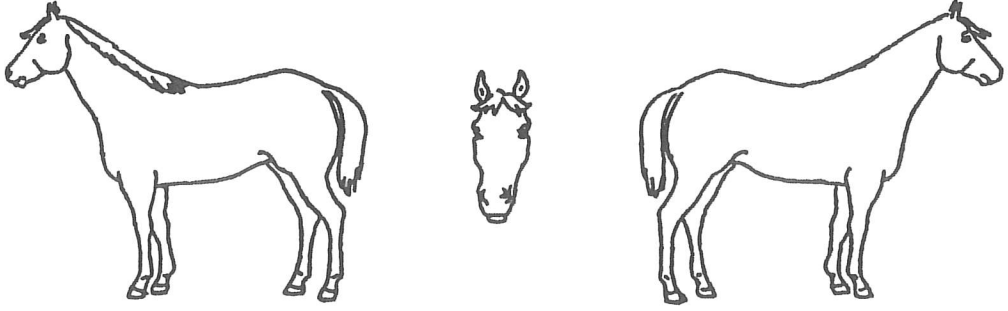
Horse Barn Name _____ Registered Name _____

Breed _____ Age _____ Colors _____ Height _____

This horse is owned by me: by my family: or borrowed:

Circle Sex:
Gelding
Mare

Sketch markings and indicate colors showing both sides and face. Horse Condition Score: _____



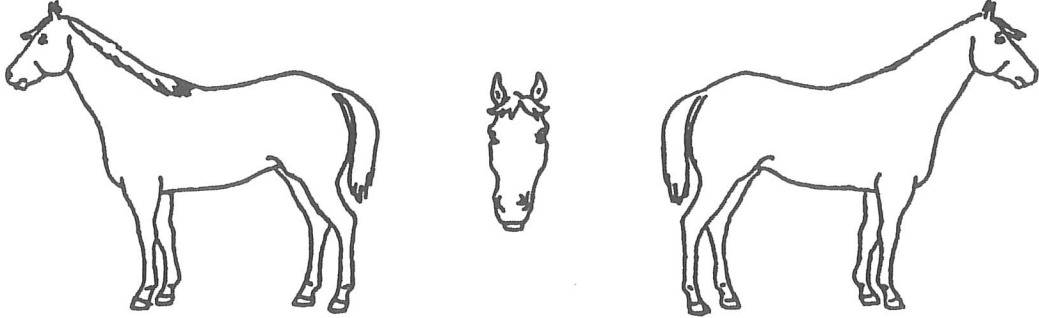
Horse Barn Name _____ Registered Name # _____

Breed _____ Age _____ Colors _____ Height _____

This horse is owned by me: by my family:

or borrowed: _____ Horse Condition Score: _____

Sketch mark



Circle Sex:
Gelding
Mare

If horse is owned by someone other than you or your immediate family, the owner must complete the following affidavit on next page.

OWNER'S AFFIDAVIT

As owner of the horse(s) described above, I certify that _____ Name(s)
has my permission to use this animal in the 4-H project.

I understand that the 4-H member(s) must manage (including feeding, grooming, exercising, training, stall management, etc.) and have access to this horse at least 75% of the time during the course of the project year.

Date _____ Owner of horse _____