

Horse and Pony Identification Form

Name of 4-H'er		Age as of last September 15
Address	City State Zip	Phone
Name of club	County	Grade
project in accordance with the regu	ulations on the reverse side of this r	nimals as part of my 4-H horse/pony report. I have read those regulations e project year shall be among those
Signature of 4-H member	Signature of parent/gua	rdian
	 Markings on sides of head and of Outline all white markings of home Clear photographs of horse's markings 	orse with dark solid lines.
Registered name	A	
Nickname/barn name		
Registered number		1
Age Birthdate		A de la companya della companya della companya de la companya della companya dell
Breed Height		
Colors		411 KM (1
Check one ☐ Gelding/stud ☐ Mare		
Check one ☐ Owned ☐ Leased		
Check one ☐ Horse ☐ Pony		
	1177 7718	3 2 2 1 2 1 1 1 1
Registered name		
Nickname/barn name	1) (C) (
Registered number		
Age Birthdate		a Vistal de
Breed Height	WI I I I	
Colors	11) / 77/ 16	411 KK (1
Check one ☐ Gelding/stud ☐ Mare		
Check one Owned Leased		
Check one D Horse D Pony		

Return the completed form to your county office of ISU Extension by May 15. County rules may be more restrictive than state rules (e.g., earlier deadlines). Check with your county ISU Extension office for county rules and deadlines.



Iowa 4-H Youth Development Dog Identification Report

Return this completed form to your county Extension office by May 15 or your county deadline.

Name of 4-H'er				County				
AddressStree	or/D D				City		Zip+four	
Silve	JUKK				City		шр нош	
Phone ()	93	Your birth da	ite		Grade in	school		
Name of 4-H Club								
I hereby certify that I dance with the regular Be sure to read the	tions on the reve	erse side of this	report. I ha					
				I ve	rify my child's	statement		
Signature of 4-H Member				Signature of Parent/Guardian				
One (1) animal per l	ine.							
Dog's Name	Rabies Vaccination Number	Date of Rabies Vaccination	*Years o	f Training Dog	Breed	Sex	Birth date, mo/day/yr	
<u></u>			AND AND THE PROPERTY OF THE PR					

Return this completed form (4-H 106e) to your county Extension office by **May 15**. County rules may be more restrictive than state rules (e.g., earlier deadlines). Check with your county Extension office for your county deadline.

^{*} Include this year.

Iowa 4-H Horse Lease Agreement	Name of Horse				
	Description of Hor	rse			
Name of 4-H'er	Age	Breed			
Address	Height				
Phone	Color				
County					
Legal Owner of this Horse	ii registered, regis	tration number			
Address	Where is horse hor	used?			
Phone					
Eligibility Requirements and Rules for Use of Leased Ho	orses				
 A "Leased" horse is any horse that is not owned by the 4-H'er or his/her immediate family (parents, siblings, guardians). Horses owned by distant family—aunts, uncles, cousins or grandparents—are considered leased horses. The objective of a leased horse project is to allow 4-H'ers who do not own a horse to learn the skills of feeding, management, care, and training of horses. Through this experience they also learn the skills of decision-making, information gathering, communication, responsibility, and self-confidence. All horses, including leased horses, must be identified on a 4-H Horse Identification form (4-H 106C) in the ISU Extension county office by May 15. If a horse is to be shown before May 15, the signed lease agreement and identification form must be in the county office before the date of the show. Exhibitors must meet all requirements included in 4-H 202. Animals identified as part of a 4-H project cannot also be identified or exhibited as an FFA project or vice versa. Leased horses are not eligible to exhibit in conformation (halter) classes because the 4-H'er did not select the animal from others based on its conformation. They are eligible to 	because these clase exhibit the animal. The 4-H'er agrees care, and training limited to, the matexercising, health exhibitors' fees, to the 4-H'er agrees horse in safe stalls horse as if he or stright to ride and e. The 4-H'er is expleast from May 15 (county fair, state. If a 4-H'er leases horse the 4-H'er reserves.	nowmanship, riding and driving classes, sees are judged on the 4-H'er's ability to a, not on the quality of the animal. It to provide a majority of the management, for this horse. This includes, but is not magement, proper feeding, grooming, and veterinary expenses, farrier services, raining, boarding, etc. It to make all reasonable efforts to keep the see, pastures, or corrals, and to care for the he was the legal owner. The 4-H'er has the exhibit this horse in all 4-H related activities ected to manage and care for this horse at through the end of the exhibiting season fair or Ak-Sar-Ben). In horse, that horse shall be the only (riding may identify as a 4-H project horse. It is the right to disqualify leased horses of previously violated 4-H rules.			
4-H'er: I hereby certify that I agree to the above rules and set forth in the 4-H Guide to Equine Shows in Iowa (4-H 51)		agree to follow the rules and policies			
Signature	Date				
Parents: I verify my child's statement and will assure his/h	er adherence to it.				
Signature	Date				
Legal Owner: I certify that I have allowed this 4-H'er to use of the current year through the county fair, state fair or Ak-Sar program, and commit to assisting the 4-H'er in developing his and his/her skills of decision-making, information gathering, c that the stipulations concerning the lease have been or will be will abide by it. I understand that failure to abide by the above exclusion from future participation in 4 H activities	-Ben horse show. I agr /her skills in feeding, rommunication, respon complied with. I have	ree to the objectives of the leased horse management, care, and training of horses, sibility, and self-confidence. I also certify read and understand this agreement, and			

Date

IOWA STATE UNIVERSITY University Extension

Signature



IOWA 4-H SHEEP VERIFICATION FORM for eligibility to exhibit at the County 4-H Show and the Iowa State Fair 4-H Show

Count	<u> </u>			Club f	Name						
Exhibitor Name				Date							
Address				City			Zip				
Telephone Number ()						Grade in School					
ГОТА	L HEAD VALIDA	TED FO	R STATE FA	AIR		V	erificati	on Fee Paid	l		
he rule nspecti may be Fair 4-I feeding guideling animals the Iow nomina county	m Book. I (we) understates on ownership, liability ion, at any reasonable tire designated and requested. I show, during the project and care of these animates. I (we) agree to allow period. I (we) agree to a set any time. I (we) also at 4-H program. I (we) ution/verification may resishow and/or the Iowa Stattor Signature	they drug testing, drug testing, by a vet and by the vet ect year shall als throughout the State and allow the usagree that anderstand the sult in forfe	ng, and the USD erinarian or oth terinarian or expected by the terinarian or expected by the terinarian or expected by the feeding pand the County of the verifications prints, DNA nat failure to about the control of the terinary of all premises the terinary of the USD and the terinary of the USD and the U	A Wholesome More expert appointed and descripted and descripted. I (we) agreed a Health staff the right and the samples, or other ide by the rules and exclusion from parts.	eat Act. I (we) as d by 4-H, and a that the animals ibed below. I (we to feed these a to inspect the l DNA analysis r samples takend regulations prds, rights, and	agree to immediagree to have so I exhibit at 4 we) recognize animals in accisted projects or other samp a by any 4-H vublished in the privileges to 6-H programs.	diately sultured anim -H shows my (our) ordance w at any rea les to con reterinaria e Premiun exhibit liv	omit any anima al submitted to including the li- responsibilities with quality assistantly assistantly sonable time diffirm the identity in or expert are a Book or the t	any tests as fowa State for the arance uring the y of these property of erms of this		
Verific	ation Site Coordinate	r Signatui	re	Pare	ent or Legal G	uardian Print	ed Name				
State Fair	Ear tag number including county and animal #	Eartag color	Ear tagged (L or R)	Scrapie Tag#	Beginning Weight	Date Weighed	Sex	Birthdate for Ewes	Breed		
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The 4-H Sheep Identification form must be filed with the county ISU Extension office on or before May 15.

4H-106D Revised April 2004