



Jefferson County Clover Kids

Animal Project Records

(This form is encouraged, but not required to show animals as a Clover Kid)

Year: _____

Please circle your animal type: Dog Pet Lamb Goat Calf Rabbit Chicken

Name: _____ Age: _____ Grade: _____

Clover Kids Group: _____

Animal's Name: _____ Birth Date: _____ Breed: _____

Youth are encouraged to attach up to 3 pictures.

Where did you keep your animal?

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What did you feed your animal?

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What was the best part of raising your animal?

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What was the most challenging part of raising your animal?

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