## Animal Care and Housing Form for Plymouth County 4-H/FFA Livestock Projects Exhibitor Name: 4-H/FFA animal projects are required to be in the personal possession and regular care of the 4-H/FFA member who owns them. Under certain circumstances, animals can be physically housed at a nearby location and within a reasonable distance to the 4-H/FFAers place of residence, but the 4-H/FFA member must take an active and majority role in the daily care of the project animal(s). 4-H/FFA county and/or state staff reserve the right to acquire housing location addresses at the beginning of the 4-H/FFA project year and make location visits as deemed necessary to ensure involvement of the 4-H member. It is the responsibility of every 4-H/FFA member to ensure that proper care is taken of their animal(s) according to acceptable methods of good animal husbandry. A healthy animal requires sufficient food, water, shelter, and appropriate health care. Primary care is defined as the 4-H/FFA member making the decisions for and/or providing the care, handling, recordkeeping and training of their animal project. Sign and return this form to the Plymouth County Extension Office as a commitment to the guidelines. Please check the box for each species that is not housed at your home address location this year. Beef Cattle Dairy Cattle Doa Goat Poultry Rabbit Sheep Swine 1. List the particular circumstances that prevent you from having your project animal(s) housed at your primary residence. 2. How do you plan to care for the project animal(s) not located at your primary residence? What arrangements have you made for traveling to and from the non-primary residence to care for your animal(s)? I hereby certify that I have read the above information and will comply with the rules set forth above. Parent/Guardian's Signature 4-H Member's Signature Physical location of animals (landlord must have a logical relationship to the 4-H member): Landlord: \_\_\_\_\_ Address: \_ City, State, Zip Code: Phone number: ☐ As the landlord of the property listed above, I acknowledge the 4-H and/or FFA program's intent is educational; as such I will encourage and require the 4-H/FFA member to be extensively and continuously involved in the care of their animals housed at my property. If deemed necessary by the Extension staff/FFA advisors/Livestock Committee/Superintendents, I grant permission to check on the 4-H/FFA member's animals while they are housed on my property.

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Landlord Signature