

PET IDENTIFICATION FORM

Due May 15th

Name of 4-Her _____ County _____

Address _____ City _____ State _____ Zip _____

Name of Club _____ Current Grade _____

Phone Number: _____

I hereby certify that the following are owned and being fed and cared for by me as a part of my 4-H small animal project. I understand that the animals which I exhibit at 4-H shows during the project year shall be among those listed and described on this form.

I verify my child's statement.

_____ Date _____

Signature of 4-H Member

Signature of Parent/Guardian

Pets

Type of Pet <small>(such as a kitten, hamster, etc.)</small>	Name of Pet	Sex	Birth Date (Mo-Day-Yr) Or Age	Colors/ Markings	Rabies Vac. # <small>(if applicable)</small>	Date of Rabies Vaccine <small>(if applicable)</small>

* RETURN THE COMPLETED FORM TO THE COUNTY EXTENSION OFFICE BY MAY 15TH.