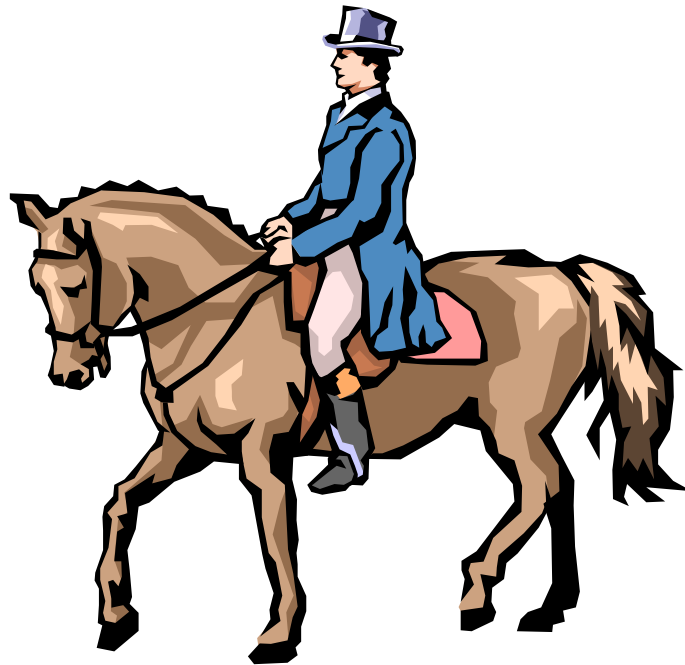


2009 Door County 4-H Horse & Pony Project Record Book



Name _____

4-H Club _____

Age _____ Grade _____ Phone Number _____

Horse's Name _____

Use one record book for each project animal!

**DOOR COUNTY 4-H
PROJECT BOOK I.D. SHEET
(Attach a copy of Negative Coggins Test)**

One clear, colored photograph of the animal must be attached.

4-H MEMBER INFORMATION Circle one: regular member horseless member

Name _____

Address _____

Phone Number(s) _____

Grade (as of Jan. 1) _____ 4-H Club _____

HORSE INFORMATION

Name of Horse _____

Sex _____ Age _____ Height in Hands _____

Breed or Type _____ Registration # _____
(Attach a copy of registration papers)

Brief Description _____

Ownership (Circle one): Personally Owned Family Owned Non-Family Owned

If Non-Family owned, list:

Owner's name _____ Phone number _____

FEEDING RECORD
April 1 through the Fair

	APRIL	MAY	JUNE	JULY	Through the Fair	TOTAL USED	TOTAL COST
Grain / Amount							
\$ Grain/Month							
Bales of Hay/Month							
\$ Bales of Hay/Month							
Cost of Salt & Additive/Month							

A. FEEDING COSTS: \$ _____

DESCRIPTION OF FEED AND SUPPLEMENTS

Grain: Whole Oats _____ Crimped Oats _____ Crushed Oats _____ Corn _____

Barley _____ Commercial Feed _____ (Give analysis or attach a tag from the bag)

Other (list) _____

Hay: Alfalfa _____ Timothy _____ Clover _____ Orchard Grass _____

Brome Grass _____ Mixed Hay _____ Other (Give Name) _____

Supplements: Vitamins (What Kind) _____ Corn Oil _____

Salt _____ Wheat Germ Oil _____ Linseed Meal _____ Bran _____ Molasses _____

Other (list) _____

JEFFERS EQUINE HEALTH RECORD

Owner _____ Name _____
 Address _____ Date Foaled _____ Sex _____ Ht. _____ Wt. _____
 City _____ State _____ Breed _____
 Zip _____ Dam _____ Sire _____
 Phone _____ Registration &/or Tattoo # _____

VACCINATION HISTORY

DISEASE	DATES OF BOOSTER			COST
Encephalomyelitis				
Influenza				
Rhino pneumonitis				
Strangles				
PHF				
Rabies				
Tetanus				
Other				

B. VACCINATION COSTS \$ _____

DEWORMING HISTORY

PRODUCT	DATE	COST

C. DEWORMING COSTS \$ _____

Date of Fecal Exam					
--------------------	--	--	--	--	--

DENTAL PROCEDURES

Date		Date	

D. DENTAL COSTS \$ _____

SUBTOTAL COSTS (B-D) \$ _____

HOOF CARE PROCEDURES

Date	Procedure	Cost	Date	Procedure	Cost

E. HOOF CARE COSTS \$ _____

MEDICAL HISTORY

Date	Symptoms / Diagnosis / Treatment	Cost

F. MEDICAL CARE COSTS \$ _____

(Add additional sheets, if you need more space.)

Now add everything together:

- A. Feeding Costs _____
- B. Vaccination Costs _____
- C. Deworming Costs _____
- D. Dental Costs _____
- E. Hoof Care Costs _____
- F. Medical Care Costs _____

GRAND TOTAL -- ALL COSTS (A-F)\$ _____

DIARY OF TIME SPENT ON MY 4-H PROJECT & ACTIVITIES

This year, my horse and I participated in the following Door County 4-H Horse & Pony Events:

- Clinic: _____
- Clinic: _____
- Clinic: _____
- Flip Flop Show
- Open Gymkhana Show
- Open Pleasure Show
- Junior Fair Pleasure Show
- Open Fair Pleasure Show
- Junior Fair Gymkhana Show
- Fall Fun Show
- Fall Trail Ride
- Drill Team

In addition, we also attended or participated in these events:

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

PARENT / LEADER EVALUATION

A. Parent evaluation of 4-H work and Signature. Discuss what your son/daughter accomplished in this project this year.

Signature _____

B. 4-H Club Leader Comments and Signature

Signature _____

C. Horse & Pony Project Chair Comments and Signature

Signature _____

PHOTOGRAPHS
(Do Not Attach Extra Pages)

REQUEST FOR FUNDING STATE EXPO AND/OR GYMKHANA

Use this form to request funding from the 4-H Horse & Pony Project to help you compete at the State Expo or State Gymkhana competition. **Exhibitors must adhere to the following requirements:**

- Attend at least three (3) Horse & Pony Committee meetings prior to the Fair (during the current 4-H year).
- Work at least two one-half day volunteer shifts at a show, clinic or workday (must sign in and out at the event).
- Exhibit their animal at the Fair, and follow all Fair rules.
- Complete and turn in all registration information, funding requests and Project Record Books on or before **Tuesday, August 11, 2009.**

A special meeting will be held on **Tuesday, August 11, 6:00 p.m. (Location TBA)** for those who need to turn in forms, funding requests and record books.

Members will...

- turn in completed Expo and/or Gymkhana forms (*please have project leader signatures before you arrive*)
- turn in written requests for funding (*address your requests to the Horse & Pony Committee*)
- turn in completed Record Books (*please have all required signatures before you arrive*)

☞ Funding is available to those riders who participate by showing their animal in the Expo or Gymkhana (funding will be issued after the events).

☞ State Expo and Gymkhana forms and information is available at:
<http://4h.uwex.edu/onlinpro/HorseHandbook.cfm>

☞ Record Books are available at <http://www.uwex.edu/ces/cty/door/4h/index.html>

I am requesting funding for the following:

State Gymkhana

4-H State Horse Expo

Name _____

4-H Club _____

Address _____

Phone _____ E-Mail _____

Signature _____

Date _____

**DOOR COUNTY 4-H
PROJECT BOOK I.D. SHEET
(Attach a copy of Negative Coggins Test)**

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Brief Description _____

Ownership (Circle one): Personally Owned Family Owned Non-Family Owned

If Non-Family owned, list:

Owner's name _____ Phone number _____

**THIS SHEET MUST BE TURNED INTO THE EXTENSION OFFICE BY JULY 1.
(along with your Fair entry form)**