

Deadline: June 1 of current year

Date: _____



4-H Beef Project Registration Certificate

This project certificate must be filled out completely by the 4-H youth.

<input type="checkbox"/>	Personally Owned
<input type="checkbox"/>	Family Owned
<input type="checkbox"/>	Non-Owned
Name of Animal :	
Registry/Breed:	
Reg. / Ear Tag Number:	
Color:	
Date Animal Born: (Mo) (Day) (Yr)	
Date of Purchase:	
Sex: (M) (F)	
Name of Sire:	
Name of Dam:	
IF ANIMAL IS NON-OWNED	
Owner Name:	
Address:	
Signature:	

<input type="checkbox"/>	Personally Owned
<input type="checkbox"/>	Family Owned
<input type="checkbox"/>	Non-Owned
Name of Animal :	
Registry/Breed:	
Reg. / Ear Tag Number:	
Color:	
Date Animal Born: (Mo) (Day) (Yr)	
Date of Purchase:	
Sex: (M) (F)	
Name of Sire:	
Name of Dam:	
IF ANIMAL IS NON-OWNED	
Owner Name:	
Address:	
Signature:	

4-H MEMBER INFORMATION

4-H'er Name: _____

Signature: _____

Parent/Guardian: _____

Signature: _____

Leader Name: _____

Signature: _____

4-H OFFICE ONLY

4-H Program Manager: Jody Tatch _____

Signature: _____

County: Tioga _____

Address: CCE, Tioga County, 56 Main St., Owego, NY 13827

This animal has been officially designated by the 4-H Office as the 4-H project animal of the 4-H member listed as of June 1 of current year.