

Deadline: June 1 of current year

Date: _____



4-H Goat Project Registration Certificate

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

<input type="checkbox"/>	Meat	<input type="checkbox"/>	Dairy
<input type="checkbox"/>	Fibre	<input type="checkbox"/>	Pygmy
<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:			

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<input type="checkbox"/>	Fibre	<input type="checkbox"/>	Pygmy
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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 Tatich _____

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.