

Minnesota 4-H Horse Identification Form



General Information

To participate in county or state 4-H activities, this form must be completed and be on file in the county extension office/ Regional Office by May 15. You or your family may own your horse, or you may lease it from someone else. If it is leased, complete the lease agreement on the back. Use one form for each horse.

- This ID form needs to be completed only once for each animal - does not need to be completed annually. Lease agreements need to be reviewed annually.

Office Use Only:
Date (dd/mm/yr)
received/renewed

County _____ Club _____

Name _____

Address _____ City _____ Zip _____

My Horse

Registered or known name (no nickname) – **must** agree with name on Coggin’s test. _____

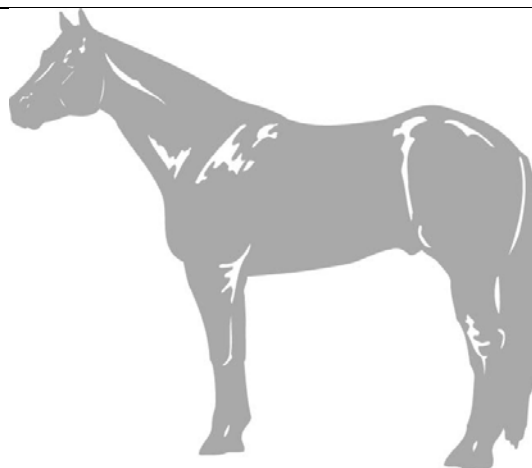
Breed _____ Birth Date _____ Mare Gelding

Grade Registered Registration number _____

Height _____ Approximate Weight _____

Who owns the horse? Yourself Family Leased

Is the horse being used for the 4-H Horse Training Program? Yes No What level? _____



Attach a photo (or photos) that shows the whole horse including head and leg markings.
(NO DRAWINGS PLEASE!)

Agreement

I understand that signing this identification form means I agree to follow the rules and policies set forth in the 4-H Project RuleBook.

(Member’s Signature)

(Date Signed)

I certify that I have reviewed the identification information, determined it to be correct, and will support the 4-H project requirements.

(Parent/Guardian Signature)

(Date Signed)

Renewed Lease Agreement:

_____ Date and Year	_____ Member Initial	_____ Owner Initial
_____ Date and Year	_____ Member Initial	_____ Owner Initial
_____ Date and Year	_____ Member Initial	_____ Owner Initial

Lease Agreement

I, _____ of _____
(Print Owners Name) (Street Address)

(City or Town) (State) (Zip)

have allowed this 4-H member to use the horse described as a 4-H project horse for the year. The member will be in charge of taking care of the horse from at least May 15th until county fair time.

Owner's Signature _____ Date _____

Member's Signature _____ Date _____

Parent/Guardian Signature _____ Date _____