



Last Name _____ First Name(s) and Age(s) _____

Mailing Address _____
Street or P.O. Box, Town, State, Zip

County _____ Phone _____ Year _____

Club _____ Member's Birthday (Month, Day, Year) _____

NEBRASKA 4-H DAIRY GOAT IDENTIFICATION AFFIDAVIT

See reverse side for important instructions and lease affidavit.

REGISTERED _____ GRADE _____ BREED _____

BRED BY EXHIBITOR: YES _____ NO _____

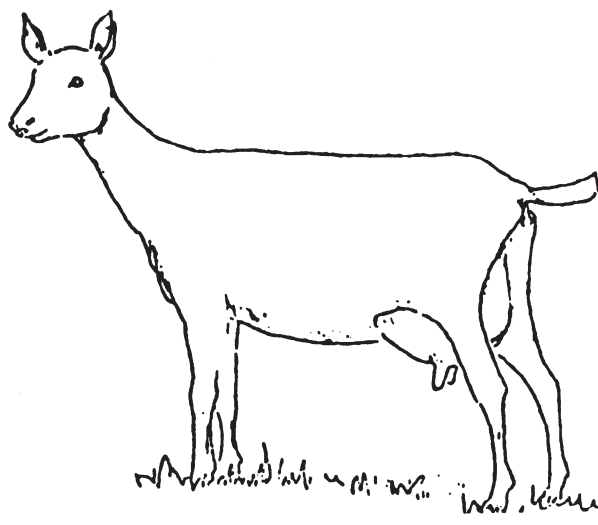
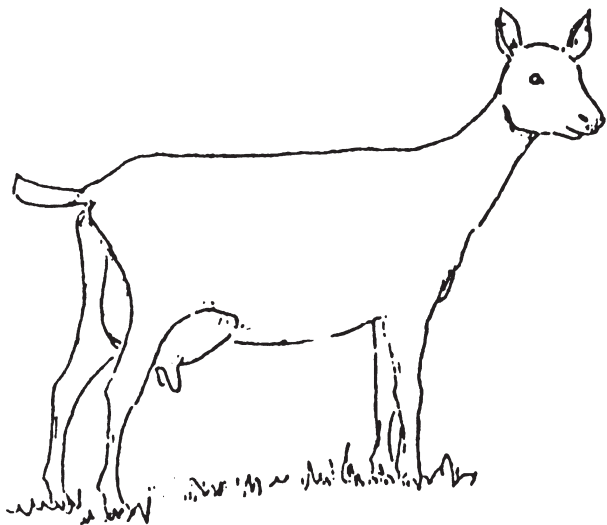
Name of Animal _____ Registry No. _____

Tattoo or Ear Tag No. Right _____ Left _____ Date Born _____
Month Day Year

Vaccination Tag No. _____

[Need at least one of these forms of ID (tattoo, tag or vaccination tag) for animals without distinct markings.]

Sketch markings and include colors or attach photographs showing both sides of face.



I (we) certify that this is a 4-H project animal this year and that to the best of my (our) knowledge the above information is correct.

Date _____

Signature of 4-H Member(s) (At least one of those listed above must sign.)

Parent Signature _____

This (these) youth has (have) submitted this livestock identification affidavit in accordance with all rules of the state and county 4-H Program and also has (have) successfully completed a Food Animal Quality Assurance program/test for this period.

Date _____

Extension Staff Signature _____