4-H HORSE PROJECT REGISTRATION FORM

Due to the La Crosse County UW-Extension office on or before **4:30 p.m.** on **May 1st**. This form must be submitted for **each** horse/pony you intend to show at the Fair.

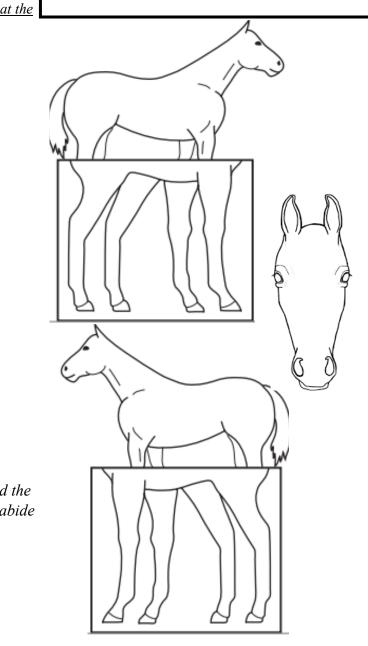
FAILURE TO DO SO WILL ELIMINATE THE ANIMAL FROM SHOWING AT THE FAIR.

**Complete and file a separate form for ANY AND ALL HORSES YOU MAY CONSIDER showing at the

Fair, including any back up horse in case of injury/illness**

Member's Name:	
Member's Grade as of January 1st:	Phone:
Email:	
	ıl:
If management, who owns the animal:	
Breed:	Registered or Grade (circle one)
Foaling Date:	Mare or Gelding (circle one)
Body Color:	Height:
Premise ID number:	
Mane Tag or Nickname of Animal:	
ACKNOWLEDGEMENT	
La Crosse County 4-H Horse Project Hand	s form is correct. We agree that we have received book. We understand the contents and agree to d and rules as stated therein.
Member's Signature:	Date:
Parent or Guardian Signature:	Date:
La Crassa County LIW Extension Office	20 212 6th St. N. Suita 2200 La Crossa, WI 54601

Horse Identification: Indicate all markings, scars, or brands on diagram below **OR** attach a color copy of your electronic Coggins test which has photos of your horse.



La Crosse County UW-Extension Office | 212 6th St. N Suite 2200 | La Crosse, WI 54601