

4-H DOG PROJECT REGISTRATION

20__

Member's name _____ Grade _____

Address: _____ 4-H Club _____

Monroe Co. Dog License # (required) _____

Birthdate: Month _____ Day _____ Year _____ Phone: _____

Date ownership/mgmt of project animal began: _____ # years (including this year) in dog project _____

If management, who owns animal: _____ (Attach copy of management agreement)

Registered Unregistered **(circle one)** Registered Name of Animal: _____

Call Name: _____ Breed/type: _____

Birthdate: _____ Body color: _____

Male Whole Female Whole Male Neutered Female Spayed **(circle one)**

DOG HEALTH RECORD

Shots/Tests	Dates of Vaccinations/Tests
Rabies 1, 2, 3 yr. Vaccine (circle one) (REQUIRED) Rabies tag # _____	
DHLPPC (Distemper, Hepatitis, Leptospirosis, Parainfluenza, Parvo corona) (REQUIRED)	
Heartworm Test _____ Negative _____ Positive _____ Not Tested _____ _____ Test waived per vet (on preventative year around) _____ Dog is under 6 months old (no mosquito exposure) Dog was on heartworm preventative through last mosquito season _____	
Internal Parasites Negative _____ Positive (indicate parasite) _____ (OPTIONAL)	

Veterinarian Signature: _____ Date: _____
(or attach current vaccination certificate which includes vet's signature)

Parent Signature: _____ Date: _____

Handler Signature: _____ Date: _____

*Trainer Signature: _____ Date: _____

By signing, trainer certifies dog and youth attended training classes.

This form must be submitted for each dog you intend to bring to training or show at the Monroe Co. Fair. Retain a copy for your records. BRING COMPLETED FORM WITH YOU TO FIRST TRAINING OR HAVE ON FILE WITH EXTENSION OFFICE if you are training with another trainer.

Mail form to: Monroe Co. Extension Office, 14345 Cty. Hwy. B, Room 1, Sparta, WI 54656

Approved by: 4-H Dog Committee and UWEX Office