

YOUTH LIVESTOCK AND SMALL ANIMAL MANAGEMENT RECORD/PROOF OF SUPERVISION

Exhibitor Name: _____ Exhibitor Age as of January 1, 2008: _____

Project: _____ Ownership/Purchase Date: _____

Animal Name: _____ Breed and/or Variety: _____

Club, Chapter, Indep. _____ Scrapie # and/or Registration _____

Required for Market Animals only: Check-In Weight: _____ Fair Weight: _____ Tag #: _____

Supervising Adult(s) Signature: _____ Date: _____

Supervising Adult(s) Signature: _____ Date: _____

May include Parent/Guardian, Project Leader, Advisor, and/or Animal Breeder

Exhibitors Signature: _____ Date: _____

Vaccination/Worming/Veterinary Care Records

Date	Vaccine, medicine, or prevention treatment administered or veterinary procedure

Feed Record

Beginning Feed

Date	Feed type changes

Finishing or Conditioning Feed

Date	Feed type changes

Livestock Supervisor Signature: _____ Date: _____