



# PROJECT ANIMAL IDENTIFICATION FORM - DAIRY



MEMBER INFORMATION		
Member's Name	Date of Birth (Y/M/D) _____ Age as of Jan. 1, 2015:	
Address	Club	
	Postal Code	
Parent/Guardian	Telephone # (     )	
Email address		
PROJECT INFORMATION		
Name of Animal		
Date of Birth (Y/M/D) _____ Check one: <input type="checkbox"/> Junior Calf, born March 1, 2015 to May 31, 2015 <input type="checkbox"/> Intermediate Calf, born Dec. 1, 2014 to last day of Feb. 2015 <input type="checkbox"/> Senior Calf, born Sept. 1, 2014 to Nov. 30, 2014 <input type="checkbox"/> Summer Yearling, born June 1, 2014 to Aug. 31, 2014 <input type="checkbox"/> Junior Yearling, born Mar. 1, 2014 to May 31, 2014	Left Ear Tattoo #	Right Ear Tattoo #
	Is this animal purebred? Yes <input type="checkbox"/> No <input type="checkbox"/> if no what percentage: _____	
Breed	ATQ #	
Name of Sire	Name of Dam	
Name and address where animal is housed		
ATQ Site #		

**Are you interested and eligible to participate in:**

TD Canadian 4-H Dairy Classic, RAWF Yes  No

Quebec 4-H Provincial Rally Yes  No

**ATQ numbers will be verified – no drawing or photo is required.**

**Member:** I declare that the above information is correct. I am a bona fide 4-H member and the above animal is my current 4-H project.

Signature \_\_\_\_\_

Date \_\_\_\_\_



**Project Leader:** I have received the Project Animal Identification Form. The information is correct, complete and legible.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Send by fax (514) 398-8652 or by mail: 21,111 Lakeshore Rd, Macdonald Campus , Harrison House 3-04, Ste-Anne-de-Bellevue, QC H9X 3V9 office@quebec4-h.com