



PROJECT ANIMAL IDENTIFICATION FORM - SHEEP



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 (YY/MM/DD)	
Check one: <input type="checkbox"/> Market Lamb <input type="checkbox"/> Breeding Ewe Lamb		ATQ #	
Check one: <input type="checkbox"/> Purebred <input type="checkbox"/> Grade <input type="checkbox"/> Crossbred		Breed(s):	
Sex of lamb: _____	Ear Tag / Tattoo No.	Left Ear	Right Ear
Name of Sire		Name of Dam	
Breed(s) of sire		Breed(s) of Dam	
Name and address of where lamb is housed			
ATQ Site #			

Are you interested and eligible to participate in:

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 3 office@quebec4-h.com