

Animal Care and Housing Form for Butler County 4-H Animal Projects

It is the responsibility of the 4-H member(s) to ensure that proper care is taken of their animal(s) by following acceptable methods of good animal husbandry. A healthy animal requires sufficient food, water, shelter, and appropriate health care. Specific animal husbandry guidelines and humane training methods are provided in 4-H manuals available upon request from the Butler County Extension Office.

The Kansas 4-H Youth Development Policies, Best Management Practices, and Information states that "Youth should provide the primary care and training for livestock or animal projects for the duration of the project." Primary care is defined as the 4-H member(s) making the decisions for and/or providing the care, handling, and training of their animal project a majority of the time.

Submission of this animal care document is required by all 4-H animal project participants each 4-H year.
This includes bucket calves, poultry, rabbits, and horses. It also includes beef, swine, meat goats, dairy goats, and sheep
(ALL Market & Breeding)
All 4-H animal projects will require this form.

Date: _____

4-H Club: _____

Exhibitor Name(s):

Address: _____

City, State, ZIP Code: _____

Telephone/Cell Phone Number: _____

This section is for animals housed at your home.

Will all of your animals be housed at your home location? Yes No

If your answer is No, please answer the following questions on the back page and list the animal(s) not housed at your home location. If your answer is Yes, please sign below.

I hereby certify that I have read the above information and will comply with the rules set forth above.

4-H Member Signature(s)

Sign Here!

Parent/Guardian Signature

Date

Revised January 2020

This section is for animals NOT housed at your home.

List the particular circumstances that prevent you from having your project animal(s) housed at your primary residence.

Please indicate where (including address) each animal will be housed and the landlord/caretaker of the residence.

Landlord/Caretaker Name: _____

Physical Address: _____

City, State, ZIP Code: _____

Telephone/Cell Phone Number: _____

How do you plan to care for the project animal(s) not located at your primary residence? What arrangements have you made for traveling in and from the non-primary residence to care for your animal(s)?

If you will not be providing care for your project animal(s) during the entire ownership period, please explain who will be providing primary care, when they will be caring for the project animal, and why you are unable to provide primary care for the project animal through the ownership period.

As the landlord/caretaker of the property listed above, I acknowledge the 4-H program's intent is educational; as such I will encourage and require the 4-H member to be extensively and continuously involved in the care of their animal(s) housed at my property.

Landlord/Caretaker Signature

Date

I hereby certify that the above information is truthful and accurate.

4-H Member Signature(s):

Sign Here!

Parent/Guardian Signature

Date