

RENSSELAER COUNTY 4-H PROJECT RECORD

OBJECTIVE: To help 4-Her's learn the responsibility and the expenses of taking care of their project equine and make sure their horse is healthy and happy.

DIRECTIONS: Pages 1-8 in this project record must be completed in full to the best of the 4-Her's ability to receive credit for this project year in most horse clubs. If a section does not apply, please enter N/A in that section. Records are graded on neatness, completion, record keeping, and goals. In order to qualify for an excellent record keeping award, all pages (not just 1-8 pages) must be completed to the best of the 4-Her's ability. Non-horse members should make a "dream Horse" project and fill in all information required as if they owned and would be taking care of that equine. If you need help, your leader or parent will help you, but it is the 4-Her's responsibility to fill out the project record. Members 12 and over are suggested to use ink or be typewritten. One color ink is preferred. Younger members may use pencil.

INTRODUCTION

This project record is for the project year starting September 20__ to August 20__

This is my __ year in 4-H

As of January 1 of this project year, my age is ____.

JUNIOR (11-13)

CIRCLE ONE: This project is being kept on

Owned Horse

Lease Horse

MEMBER'S NAME: _____

ADDRESS: _____

CLUB NAME: _____

Project Records are due to the 4-h Office by the September PDC (3rd Tuesday of the month).

GOAL(S) PAGE

1. When you receive your project record, think of some short-term goals or a long-term goal that you wish to try to accomplish this year with your equine project. As the year progresses, write in how things are going and what you are doing to try to achieve your goal(s). Non-horse members may use other goal ideas like what they would like to learn about horses this year.

STARTING GOAL: _____

APRIL: (how are things going?) _____

AUGUST: (DID YOU ACHIEVE YOUR GOAL? WHAT DID YOU DO TO FINALLY COMPLETE YOUR GOAL?) _____

4-H PAGE

2. What is the 4-H Motto? _____

3. What is the 4-H Pledge?

4. What are the 4-H colors? _____

5. What do these colors mean?

6. What do you like best about the 4-H program? Why? _____

SAFETY PAGE

7. List 4 of your main safety rules you use daily when you are working around your horse.

- 1. _____
- 2. _____
- 3. _____
- 4. _____

8. List 4 of your main safety rules you use daily when you are working around your horse.

- 1. _____
- 2. _____
- 3. _____
- 4. _____

9. List 2 things you should always bring with you on a trail ride.

- 1. _____
- 2. _____

10. Please describe any incident that happened to you that made you take extra safety precautions the next time you rode, fed, or worked around your horse. What do you do different now?

IDENTIFICATION PAGE

Please describe your equine project for this year.

HORSE'S NAME: _____

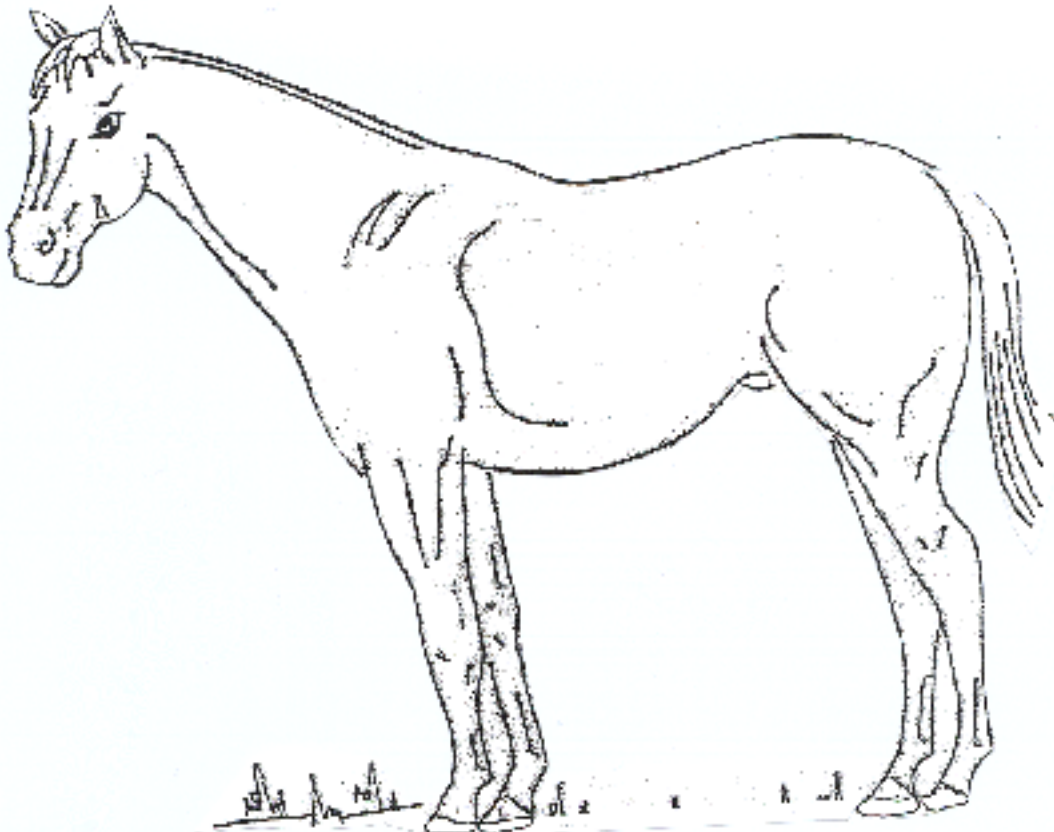
BREED: (If your equine is a grade, please also tell what breed your horse resembles.)

GENDER: _____ AGE: _____ HEIGHT: _____ WEIGHT: _____

COLOR: _____

ANY SCARS OR OTHER UNIQUE MEANS OF IDENTIFICATION? _____

PLEASE FILL IN ALL MARKINGS AND IDENTIFYING MARKS ON YOUR HORSE OR ATTACH A PHOTO IN THIS AREA.



FEED RECORD

Each month record the amounts of grain, hay, salt and minerals, pasture, and other feeds your horse or pony ate.

| Month | Grain Amount (lb) | Hay Amount (lb) | Salt & Minerals Amount (lb) | Pasture Amount (days) | Other Feeds | |
|--------------|-------------------------|-----------------------|-----------------------------------|-----------------------------|-------------|--------|
| | | | | | Feed | Amount |
| (Example) ** | 210 | 330 | | 10 days | | |
| October | | | | | | |
| November | | | | | | |
| December | | | | | | |
| January | | | | | | |
| February | | | | | | |
| March | | | | | | |
| April | | | | | | |
| May | | | | | | |
| June | | | | | | |
| July | | | | | | |
| August | | | | | | |
| September | | | | | | |

** In the above example, 210 pounds of grain and 330 pounds of hay were fed during the month. The horse spent 10 days on pasture. No salt, minerals, or other feeds were purchased during this month.

STABLE RECORD – Include, by month, the amount and value of feed, and other items.

| | Bedding (Kind and amount) | Labor (hours) | Riding instruction Or training | Health Care | Farrier | Equipment or other items |
|------------------|----------------------------------|----------------------|---------------------------------------|--------------------|----------------|---------------------------------|
| (Example) ** | Straw – 400 lbs | 60 | 3 lessons | Dewormer | Reset shoes | Brush |
| October | | | | | | |
| November | | | | | | |
| December | | | | | | |
| January | | | | | | |
| February | | | | | | |
| March | | | | | | |
| April | | | | | | |
| May | | | | | | |
| June | | | | | | |
| July | | | | | | |
| August | | | | | | |
| September | | | | | | |

** In the above example, 400 pounds of straw were used for bedding, the member spent 60 hours working with his/her horse, had three lessons, dewormed his/her horse, had his/her horse’s shoes reset and purchased a brush. Make an entry only for the month you purchased items, not for the month they were used.

13. Please describe your normal daily routine to care for your horse. Start in the morning with what your chores are and go through the day.

Does your routine change with the seasons? _____

Summer: _____

Winter: _____

14. Please describe any leadership roles or offices held that you have in your club this year?

15. What lessons or demonstrations have you given to your club?

16. Has your club participated in any community service project this year? _____ If yes, explain what the project was.

17. Describe any other ways you have helped out your 4-H club.

18. Have you participated in any 4-H county, regional, state, or national horse related event? _____ If yes, please explain

19. What is your most important or enjoyable 4-H award, ribbon, certificate, trophy, or item you feel has the greatest meaning to you this year and why? _____
