



Lamb Health Record



(This completed form is Required to unload your Lamb at the NWMI Fair)

Youth Producer Information:	
4-Her Name:	County Registered:
Home Address:	
Phone #:	4H Club:
Animal Information:	
Breed of Lamb:	Ear Tag #:
Lamb DOB:	Date of Purchase:

Vaccinations:		
Name of Vaccine:		
1st Vaccine:	Date Given:	Person Giving Vaccination:
2nd Vaccine:	Date Given:	Person Giving Vaccination:

Worming: All 4-H lambs MUST be dewormed at least 30 days prior to coming to the fair!	
Brand of Wormer:	Date of Deworming:
Brand of Wormer:	Date of Deworming:

Other Medications or Supplements		
List ALL other medications or supplements that your lamb has received while in your care. (Attach extra pages if needed)		
Medication/Supplement:	Date Given:	Reason: