



Northwest Michigan 4-H Livestock 2020 Registration Form



Dog

Select all that apply: Graduating Senior Cloverbud Differently Abled

4-H Member Information: (Please print legibly or complete the fillable form)

Name: _____ 4-H Age (as of 1/1/20): _____ Date of Birth: ____/____/____

Address: _____ City _____ Zip _____ Phone: _____

Parent(s)/Guardian(s): _____
(As you want written in the Auction Book)

Parent's Phone: _____ Parent's Email: _____

Parent's Phone: _____ Parent's Email: _____

4-H Club: _____ Leader's Name: _____

Phone: _____ E-mail: _____

4-H Dog Vaccination Information:

Immunizations: A copy of each dog's immunization record is required – Attach a copy to this form
Required: Distemper/Parvovirus/Adenovirus (Hepatitis) & Rabies **Recommended:** Letospirosis & Bordetella

Dog's Name: _____ Dog's Sex: Male Female

Dog's Breed: _____ Neutered/Spayed: Yes No

Vaccination Expiration Dates: Distemper/Parvovirus/Adenovirus (Hepatitis): _____

Rabies: _____ Leptospirosis: _____ Bordetella: _____

Dog's Name: _____ Dog's Sex: Male Female

Dog's Breed: _____ Neutered/Spayed: Yes No

Vaccination Expiration Dates: Distemper/Parvovirus/Adenovirus (Hepatitis): _____

Rabies: _____ Leptospirosis: _____ Bordetella: _____

Registration Due: June 1st, 2020 at the Livestock Council's Monthly Meeting

Requirements are in the NWMI Livestock Council Guidebook and provided at Council Meetings.

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