



Northwest Michigan 4-H Livestock 2019 Registration Form



Market Goat

Graduating Senior

Differently Abled

4-H Member Information:

Name: _____ 4-H Age (as of 1/1/19): _____ Date of Birth: ___/___/___

Address: _____ Phone: _____

Parent(s)/Guardian(s): _____

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

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

4-H Club: _____

Club Leader's Name: _____ Phone: _____

4-H Animal Information:

Project's Breed: _____

Project's Date of Birth: ___/___/___ Project's Ear Tag #: _____

Is the goat housed at the address listed above? Yes No

If No, provide address and contact information for the location it is housed at:

Contact Person: _____ Contact Phone: _____

Address: _____

Registration Due: March 4, 2019 at the Livestock Council's Monthly Meeting

www.northwestmichiganlivestockcouncil.org nwmi4hlivestock@gmail.com