

University of Vermont Extension 4-H Goat Project Record

Name: _____

Club Name: _____

Number of years in this project: _____

Circle type of project: Club Independent

Leader(s)/Mentor(s) Name(s): _____

Member Signature: _____ Date: _____

Leader/Mentor Signature: _____ Date: _____

Written and compiled by Wendy Sorrell, State 4-H Livestock Educator, portions adapted from New Jersey 4-H Project Record Book, Rut

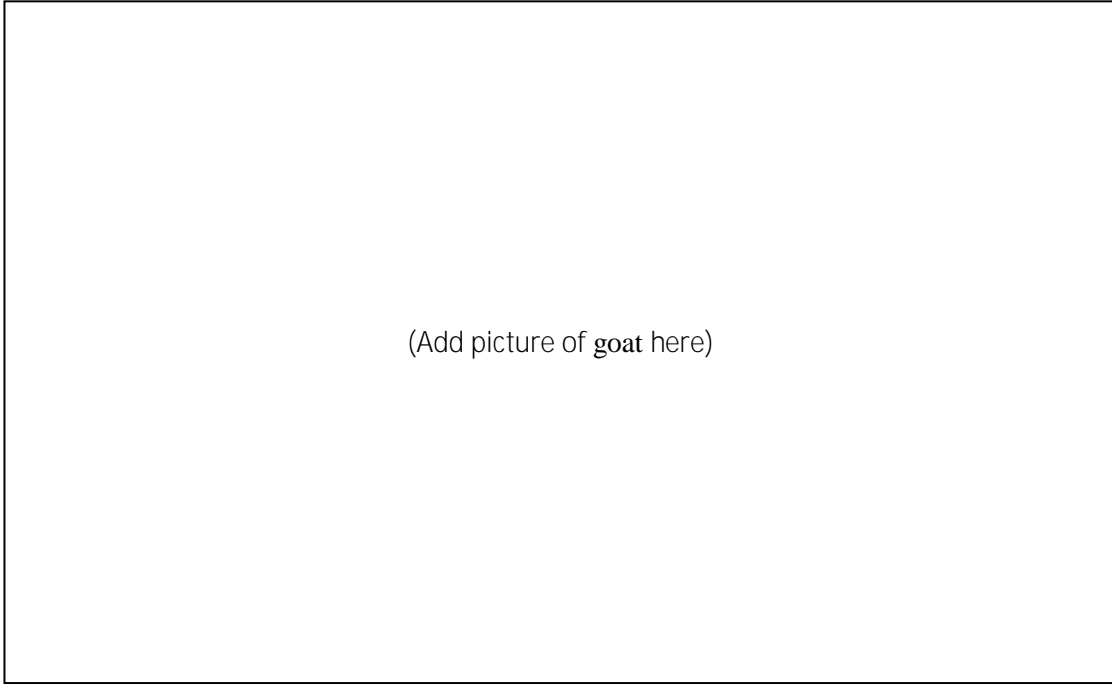
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State at least three goals at the beginning of your 4-H project year. Tell the things you want to learn from you 4-H goat project. Please discuss these goals with your leader.

1. _____

2. _____

3. _____



(Add picture of goat here)

Ancestry

Goat's Name _____ Reg#/AID# _____

Breed _____ Date of Birth _____

_____ | _____
Si | Sire
_____ | _____

_____ | _____
_____ | _____

Animal name _____

Health and Management Record: List dates action taken.

Year 2009 Year _____ Year _____ Year _____ Year _____

<i>Rabies</i>	<i>March 30</i>				

Feed and Bedding Expenses

Name of animal _____ Year _____

Age of animal (months) _____ at start of project.

Lbs. of
Grain

Project Goat Inventory

Use

Expenses

This section

Animal Care & Management*

Because your project is a living creature, it requires care and management. Here is the place to explain what you regularly do for or with your

Fiber Records (use for fiber goats)*

Record the fiber weight and income (if fiber is sold) for each project to assist with determining its health status and monitor how age and management of the goat affects the quality of the fiber.

Animal's name	Breed	Sex	Date of Birth	Date Shorn	Fiber Quality	Fiber Weight	Income
Total income from fiber(add the income and put this in the box at right)							

**From the New Jersey 4-H Goat Project Record Book*

End of year signatures

By signing below, I am stating that I have completed this record book myself and, to the best of my knowledge, the information included in it is correct.

Member signature

Date

By signing below, I am stating that I am familiar with this work and, to the best of my knowledge, the member completed this record book and the information included in it is correct.

Parent signature

Date

4-H Club Leader

Date

Important Telephone Numbers

Veterinarian name _____ Phone _____

Emergency Phone Number(s): _____

Leader Name _____ **Phone** _____

Leader Name _____ **Phone** _____

4-H Educator _____ **Phone** _____

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4-H Motto

4-H Slogan