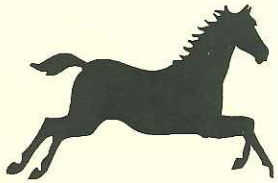
MEMBER NAME

BIRTH DATE

STATEMENT OF OWNERSHIP

Rensselaer County
Cooperative Extension
4-H Horse Program



RIDING (✓)						NAME OF HORSE	AGE	GELD. (G) MARE (M)	COLOR	HEIGHT (XX.X)	REGISTRATION NUMBER	SEE NOTE			
												E/W	DSG	DR	S

NOTE: For planning purposes please indicate whether horse is usually ridden English (E) or Western (W) by this rider
And if horse will be in Dressage (DSG), Diving (DR), Saddle Seat (SS)

I hereby certify that the animal(s) is/are owned by the member (or by our family) and have been kept
As a 4-H project animals since June 1st of the current year.

_____ /____/_____/____

Signature Date: