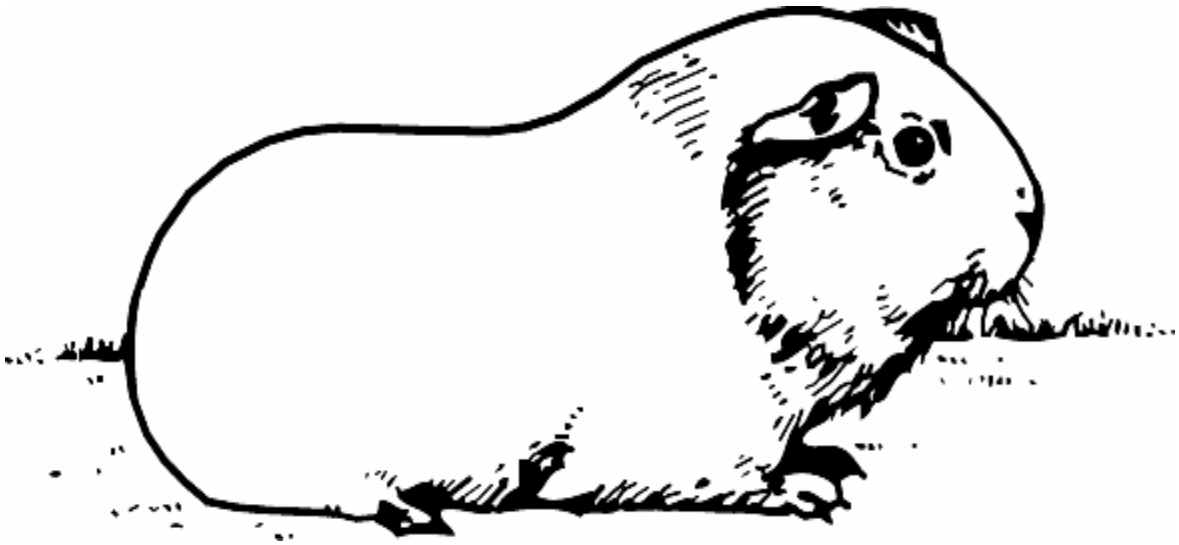
NYS 4-H Cavy Project Record



Member's Name

_____

Address_____

_____

Number of years enrolled in 4-H Cavy Project _____ **Age** _____

County _____ **Club** _____

Project Year_____

My goals this year_____

Small animal interviews on Wednesday of Fair from 1 to 3.30 pm in the Livestock area.

Project records are due into the office the first Friday in September. If Showing at State Fair they will be due into the office the second Friday of September.

Acknowledgments

This project record was developed by members of the New York State 4-H Rabbit & Cavy Advisory Committee. Special thanks go to the Cornell Cooperative Extension Associations of Onondaga, Erie, Orleans, Cayuga, Ulster, Orange, Saratoga, Schoharie, Madison and Tompkins for providing volunteer editors and contributors. The intent of this record book is to supply New York youth with a uniform project record format that can be adapted to fit local needs and situations. Whether children choose to raise cavies for pets or production they will gain skills in record keeping and time management. In addition to caring for Cavies, encourage youth to participate in public presentations or community service activities to support animal rescue shelters. All youth can help others learn how to care for new animals. Each year, encourage children to set their own new goals.

If you have questions, comments, additions or suggestions, please contact Cornell University Department of Animal Science, Youth Extension Associate, Brian Aukema, in Morrison Hall. Phone: 607-254-1208 or e-mail: **bja14@cornell.edu**.

One original hard copy has been provided to each county 4-H office. Please make additional copies as needed. You may also request an original via e-mail.

May 2006

4-H Rabbit & Cavy Rules and Regulations

1. All 4-H youth project rabbits, cavy and small pets must have been owned or leased and cared for by the exhibitor by June 1st of the current year. 4-H youth must turn in an entry form for fair by June 1st of the current year to the CCE 4-H office in order to show at fair.

2. Breeds listed in each category will be identical to those listed in the American Rabbit Breeders Standards of Perfection.

3. All youth cavies must conform to the rules and regulations of the Livestock Health Requirements as determined by the New York State Department of Agriculture and Markets.

4. The Show Superintendent or the New York State Department of Agriculture & Market Veterinarian are authorized and empowered to cause the removal from the buildings and grounds of all animals failing to meet the health conditions specified.

5. All youth cavies must pass a mandatory vet health check between 10-3 p.m. on Animal Arrival Day on the fairgrounds before they can be placed in cages.

6. Animals not passing the health check will be sent home.

7. Cavies must be brought to the fair in a suitable carrying case/cage.

8. Exhibitors must wear a long sleeve show white coat or a long sleeve collared white button shirt. Clean and neat jeans, slacks or kaki type pants must be worn.

9. Exhibitors must furnish their own feed, water and dishes. Exhibitors are responsible for feeding and watering their own animals. Cages must be cleaned on a regular basis.

10. On show days, all care, fitting, and grooming must be done by the 4-H youth.

11. 4 Entries per exhibitor for rabbits and rabbits will need to be permanently tattooed.

INVENTORY

CAVIES CARED FOR AT BEGINNING OF PROJECT YEAR

Animal Name	Number	Breed	Age	Sex	Value*	Value of Cavy at end of project
				Total		

* The price you would ask if selling the Cavy.

INVENTORY

EQUIPMENT

	Start of Project	End of Project	
Item	Number	Number Purchased	* Value
Cages			
Feeders			
Water bottles			
Carriers			
Other:			
		Total	

* Value only of purchased equipment during present project year.

BUSINESS RECORD – BUYING

Animal Name	Breed	Number	Age	Sex	Weight	Date Purchased	Purchased From	Purpose	Cost
								TOTAL:	

EXPENSES

FEED

Date Purchased	* Feed type	Amount	Cost

Total Cost for the Year _____

* Feed Type means pellets, hay, or other feed including treats. If pellets – write the milling date next to the word pellets. Example: Guinea pigs need a minimum of 16 milligrams of vitamin C per kilogram of body weight. Pellets that are over 90 days old have decreased nutritional value.

EXPENSES CONTINUED

#1 MEDICINE – Includes visits to the veterinarian and prescription or over-the-counter medicines.

Date Purchased	Product Name	Amount	Use	Place of Purchase	Cost

Total Cost for the Year _____

#2 OTHER

Date Purchased	Item	Amount	Use	Cost

Total Cost for the Year _____

EXPENSES
SHOW COSTS

Show Date	Place of Show	Number of Entries	Cost Per Entry	Total Cost of Entries *
			Total	

***Multiply number of entries by Cost per Entry: See example**

6-1-02	**NYS Fairgrounds**	**4**	**$2.00**	**$8.00**

HEALTH RECORD

#1

Animal Name	Number	Breed	Sex	Age	Illness Name +/or Symptoms	Treatment	Date Illness First Treated	Success- Yes, no, disposed

DEATH RECORD

#2

Animal Name	Animal Number	Breed	Sex	Age	Death Date	Value of Cavy @ Death
					Total	

BUSINESS RECORD – SELLING

Animal Name	Breed	Number	Age	Sex	Date Sold	Purchaser	Why Sold	Sold For $
							Total:	

CAVY PRODUCTS SOLD (ex: equipment, pets, etc.)

Item	Date	Quantity	Purpose	Sold for ($ amount)
			TOTAL	

YEAR END
FINANCIAL STATEMENT

INVENTORY AT BEGINNING OF PROJECT YEAR

		Totals
Value of cavies at beginning of project (page 1)	$ _____	
Value of equipment already owned	$ _____	
Total Value of Inventory		$ _____

EXPENSES FOR CURRENT YEAR

Value of purchased equipment (Page 2)	$ _____
Cost of cavies purchased (Page 3)	$ _____
Cost of feed for the year (Page 4)	$ _____
Cost of medicines purchased (Page 5, #1)	$ _____
Other items purchased (Page 5, #2)	$ _____
Show costs (Page 6)	$ _____
Total Expenses	**$ _____**

RECEIPTS

Value of animals sold (Page 8)	$ _____
Total Cavy products sold (Page9)	$ _____
Total Receipts	**$ _____**

	Total Receipts	**$ _____**
	Minus Total Expenses	**$ _____**
=	**Profit or Loss ***	**$ _____**

*** Please circle profit or loss**

INVENTORY AT END OF PROJECT YEAR

Value of cavies at end of project (Page 1 and Page 3)	$ _____
Value of Equipment (Page 2)	$ _____
Value of cavies that died (Page 7, #2)	$ _____
Total Value of Inventory	$ _____

BREEDING RECORD

Animal Name	Animal Number	Breed of Dam	Date Bred	Sire Name or Number	Breed of Sire	Owned or Borrowed	Due Date	Date Born

PUP RECORD

Dam	Sire	Date Born	# Born	# of Surviving Young		Date Weaned	Pups Kept	
				# Boars	# Sows		# Boars	# Sows

SHOW RECORD

Animal's Name	Breed	Animal Number	Place of Show or Sponsoring Club	Date	Placing	Ribbon Color	Points*

*To Figure Points Do The Following:

First Place	6 points
Second Place	4 points
Third Place	3 points
Fourth Place	2 points
Fifth Place	1 point

Multiply this number times the number of animals in the class.

Cavy Name: _____

Breed: _____ Number: _____

FEEDING SCHEDULE

Dates *	Feed Type	Feed Amount	Reason For Change

***** Dates should only change when feed amount or feed type changes.

RELATED PROJECT ACTIVITIES COMPLETED

Dates	Location	Activity	Things I learned
July 20, 2002	County Animal Shelter	Donated cages for rescued animals	I learned some statistics about pet overpopulation and ways I can prevent this community problem.