

Animal Care and Housing Form for 4-H Livestock Projects (Adopted from Colorado 4-H, CSU Extension)

It is the responsibility of every 4-H member to ensure that proper care is taken of their animal(s) according to acceptable methods of good animal husbandry, as set forth by Loudoun County 4-H. A healthy animal requires sufficient food, water, shelter, and appropriate health care.

The Loudoun County 4-H current project recommendation for primary care states that 4-H members will provide primary and continuous care for the health and welfare of their project animals. However, Loudoun's evolving demographics create situations where 4-H members can't access their project animal every day.

Therefore, an exemption from primary care must be approved by the 4-H Club Leader(s) and 4-H Extension Agent. Each situation for exemption of primary care will be evaluated by the respective 4-H Club Leader(s), the caretaker of the property where the animal(s) will be kept and the 4-H Extension Agent. An approval or disapproval of the situation will be communicated to the participant(s) in writing (electronic).

Submission of this animal care document is required by all 4-H livestock project participants each 4-H year, with the understanding that there is the potential for periodic in-person visitations by the Club Leader(s) and/or Extension Agent, as necessary.

Please circle each club you are enrolled in this year. Sign and return this form to the Loudoun County Extension Office (drop-off, mail or scan and email to carlymg@vt.edu) as a commitment to the above guidelines. Forms are due by the following respective dates:

Beef (Steer, Senior Yearling Heifer, Early Junior Yearling Heifer and Late Junior Yearling Heifer): **May 1st**

Beef (Summer Yearling Heifer, Senior Heifer Calf and Junior Heifer Calf): **May 1st**

Sheep (Yearling and Aged Breeding Stock): **May 1st**

Sheep (Market Lambs and Lambs shown in Breeding Classes): **June 1st**

Dairy: **May 1st**

Goat: **June 1st**

Canterlopes: **May 1st**

Overlook (Horse): **May 1st**

Hoofprints: **May 1st**

Swine: **May 1st**

Rabbit Hopping: **June 1st**

Leaps & Squeaks: **June 1st**

Poultry: **June 1st**

Temple Hall Non-Ownership Sheep: **June 1st**

Please circle all clubs that apply.

Invent the Future

VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

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Date: _____ Email Address: _____

Exhibitor Name: _____

Physical Address: _____

City, State, and Zip Code: _____

Telephone/cell phone number: _____

1. Will **all** of your animals be housed at your **home**?

Yes No

If your answer is No, please complete the remainder of this form.

If your answer is Yes, please skip questions 2 – 6 and complete the certification and signature.

2. List the particular circumstances that prevent you from having your project animals(s) housed at your primary residence.

3. Please indicate where (including address) each animal will be housed and the caretaker of the residence.
(Horse projects only: Check this box if your horse(s) is being boarded and supply the following information.)

Caretaker Name: _____

Physical Address: _____

City, State, and Zip Code: _____

Telephone/cell phone number: _____

4. How do you plan to care for the project animal(s) not located at your primary residence? What arrangements have you made for traveling to and from the non-primary residence to care for your animal(s)?

5. If you will not be providing primary care for your project animal(s) during the entire ownership period, please explain who will be providing primary care, when they will be caring for the project animal, and why you are unable to provide primary care for the project animal through the ownership period.

6. What 4-H shows do you plan to participate in? You will be under the same primary care requirements at all times. Please list the shows below:

As the caretaker of the property listed above, I acknowledge the 4-H program's intent is educational; as such, I will encourage and require the 4-H member to be extensively and continuously involved in the care of their animals housed at my property. If deemed necessary by the Extension Agent, I grant the Extension Agent permission to check on the 4-H member's animals while they are housed on the property listed above, provided advance notice of such visits are given.

Caretaker's Signature

Date

I hereby certify that the above information is truthful and accurate. I have read the information above regarding primary care. I will comply with the rules and guidelines set forth herein.

4-H Member's Signature

Parent/Guardian's Signature

4-H Leader's Signature

4-H Leader's Signature (Club #2 – if applicable)

4-H Leader's Signature (Club #3 – if applicable)

4-H Leader's Signature (Club #4 – if applicable)

4-H Leader's Signature (Club #5 – if applicable)

4-H Leader's Signature (Club #6 – if applicable)

*Your request for Animal Care Exemption has been:

Approved

Denied

4-H Extension Agent's Signature

Date