

Permanent 4-H Horse Health Record

Horse's name _____ Member's name _____

This is designed to record all health management practices and /or treatments administered to the horse recorded on the front side of this form. It should include vaccinations, worming, hoof care/shoeing, etc.; anything that impacts this horse's overall health. Use a separate health record for each project horse.

Date	Symptoms/diagnosis (Lameness, injuries, etc.)	Treatment/prevention (Worming, shoeing, etc.)	Product used (Product name, type, etc.)
Ex. 4/9/09	Rough hair coat, rubbing tail	Worming	Zimectrin paste

Record of Vaccinations

List date and all condition(s) targeted by each vaccination administered; add others in blanks provided.

Date (day/mo/yr)	Annual/ Booster	Tetanus	EEE	WEE	Influenza	RH	PHF		

EEE = Eastern Equine Encephalomyelitis; WEE = Western Equine Encephalomyelitis;; RH = Rhinopneumonitis; PHF = Potomac Horse Fever

4-H RIDING AND/OR TRAINING RECORD

Record riding and training for ALL enrolled project horses, including Green Horse and Spare Horse.			
Time Period	Hours		Remarks (work, training done, where, etc.)
	Training	Pleasure	
Oct 1-15			
Oct 16-31			
Nov 1-15			
Nov 16-30			
Dec 1-15			
Dec 16-31			
Jan 1-15			
Jan 16-31			
Feb 1-15			
Feb 16-28			
March 1-15			
March 16-31			
April 1-15			
April 16-30			
May 1-15			
May 16-31			
June 1-15			
June 16-30			
July 1-15			
July 16-31			
Aug 1-15			
Aug 16-31			
Sept 1-15			
Sept 16-30			
TOTAL			

DEFINITIONS: *TRAINING* - Record all hours spent preparing your horse for the County Fair. *PLEASURE* - Include all riding not listed under "training". This could include but is not limited to hours ridden on 4-H project horse for farm or ranch work, at home, rodeos, or shows. **NOTE:** "Horses are Fun" members will estimate Training, Pleasure, or Work hours for their project.

EXPENSE RECORD

Date	Feed	Health	Horse/Tack	Misc.
October				
November				
December				
January				
February				
March				
April				
May				
June				
July				
August <small>[NOTE: Members should estimate expenses thru September 30 to complete the 4-H year]</small>				
September				
GRAND TOTAL (for all expenses)	\$	\$	\$	\$
Any INCOME EARNED (if applicable)	\$	\$	\$	\$
Source of Earned Income:				\$

Phase 1 — Use the date of the first or second meeting to show those items of knowledge and skill which you have achieved. Use the date of the Achievement Day to indicate those items which you wish to accomplish this year. Leaders should initial each item when the member satisfactorily demonstrates that they have achieved that knowledge or skill level.	Date	Leader Approval	Non-Horse Project
1. Name, locate, and spell the following parts of the horse: poll, muzzle, withers, shoulder, forearm, knee, heart girth, flank, rump, hock, fetlock, and pastern.			
2. Name, point out, and spell these parts of a saddle: horn, cantle, dee-rings, fender, pommel, and skirt.			
3. Name, locate, and spell the following bridle parts: curb strap, headstall, nose-band, bit, and throatlatch.			
4. What are two requirements of a saddle blanket?			
5. Name and spell four breeds of saddle horse.			
6. Describe which feeds you give your horse, how much do you give, and when and how do you feed your horse.			
7. (a) Halter and tie your horse.			
(b) Lead your horse.			
(c) Brush and groom your horse.			
(d) Pick up and clean a front foot.			
(e) Bridle and saddle your horse (smaller members show proper procedure)			
8. (a) Mount and dismount (smaller members show proper procedure)			
(b) Ride demonstrating proper seat and balance.			
(c) Demonstrate proper neck and direct reining.			
(d) Demonstrate basic control at (slow gaits) walk, trot, lope, and stop.			
9. Name six safety rules all 4-H members should observe when working with or riding their horse.			
10. Pose your horse as in a showmanship class.			
11. Name three "aids" used in riding.			
12. Figure 8 at a lope and demonstrate a simple lead change.			
13. Trot in a figure 8.			
14. Sidepass one direction.			
15. Lead the horse in a straight line, stop, set up, turn around, lead in a full circle to the right, stop, back the horse in a straight line 6 steps.			

Leader Approval _____ Date ____ / ____ / ____

Phase 2 — Use the date of the first or second meeting to show those items of knowledge and skill which you have achieved. Use the date of the Achievement Day to indicate those items which you wish to accomplish this year. Leaders should initial each item when the member satisfactorily demonstrates that they have achieved that knowledge or skill level.	Date	Leader Approval	Non-Horse Project
1. Spell and define the following horse terms: filly, mare, sire, dam, conformation and hand.			
2. Spell and tell where the following unsoundnesses are located: ring bone, curb, thorough pin, splint, side bone, and hernia.			
3. Name and spell the parts of your horse's feet and legs: sole, frog, wall, gaskin, stifle, and cannon.			
4. Demonstrate how to pick up and clean a horse's front and rear feet.			
5. Demonstrate how to properly back your horse from the ground.			
6. (a) Demonstrate the proper basic aids at the following gaits: walk, trot, and lope.			
(b) Demonstrate correct leads both ways in a figure 8 (may use simple change)			
(c) Demonstrate a stop from the walk, trot, and lope.			
(d) Back your horse 10 steps in a straight line.			
7. (a) Describe three different types of bits and/or hackamores.			
(b) Demonstrate proper use of boline, clove hitch, and hitching tie.			
8. Tell how much feed your horse needs to meet its requirements.			
9. Describe the different kinds of personal gear and proper use: Western boots, spurs, chaps, gloves, western hat			
10. Name at least four light horse breeds and the purpose for which they were developed.			
11. Side pass both directions.			
12. Demonstrate a proper slide stop.			
13. Demonstrate a flying lead change in a figure 8 at the lope.			
14. Demonstrate a proper mount and dismount.			
15. Ride without stirrups (slow walk, trot, and lope).			

Leader Approval _____ Date ____ / ____ / ____

Phase 3 – Use the date of the first or second meeting to show those items of knowledge and skill which you have achieved. Use the date of the Achievement Day to indicate those items which you wish to accomplish this year. Leaders should initial each item when the member satisfactorily demonstrates that they have achieved that knowledge or skill level.	Date	Leader Approval	Non-Horse Project
1. Demonstrate the basic aids for obtaining the following movements and be prepared to tell how the aids used influence the action of the horse: (a) Turn on forehand (one half turn each direction)			
(b) Turn on rear quarters (one half turn each direction)			
(c) Side pass both directions			
(d) Balanced stop from straight movement at walk, trot, canter			
(e) Balanced stop from trot and canter in a circle			
(f) Flying change of leads in figure 8 at the canter			
(g) Demonstrate proper riding at walk, trot, and canter from standing start			
(h) Change of leads on a straight-a-way at canter			
(i) Back the horse straight and in a circle			
(j) Demonstrate and explain “gathering your horse”			
2. Discuss feed nutrient tables and how your current ration meets your horse’s requirements.			
3. Demonstrate and explain how to tell a horse’s age from its teeth (at 2, 4, 6, and 10 years of age)			
4. Describe a proper disease and parasite prevention program.			
5. Pick up all four feet and demonstrate or describe proper trimming.			
6. Be able to describe the basic steps in horse judging.			
7. Be able to describe a proper method of giving oral reasons.			
8. Describe and point out the location of common unsoundnesses of horses.			
9. Be able to discuss how your horse has responded to training including any problems you had and how you overcame them.			
10. Describe what you did to help your leader with younger members.			

Leader Approval _____ Date ____/____/____

OWYHEE COUNTY 4-H HORSE IDENTIFICATION CERTIFICATE Year _____

CIRCLE ONE: **Project Horse** **Spare Horse** **Green Horse**

Member's Name _____ Address _____ City _____ State _____ Age as of Jan 1 _____

Name of Other Member if a Joint Project _____ Address _____ City _____ State _____ Age as of Jan 1 _____

Phone _____ E-mail _____ Club _____

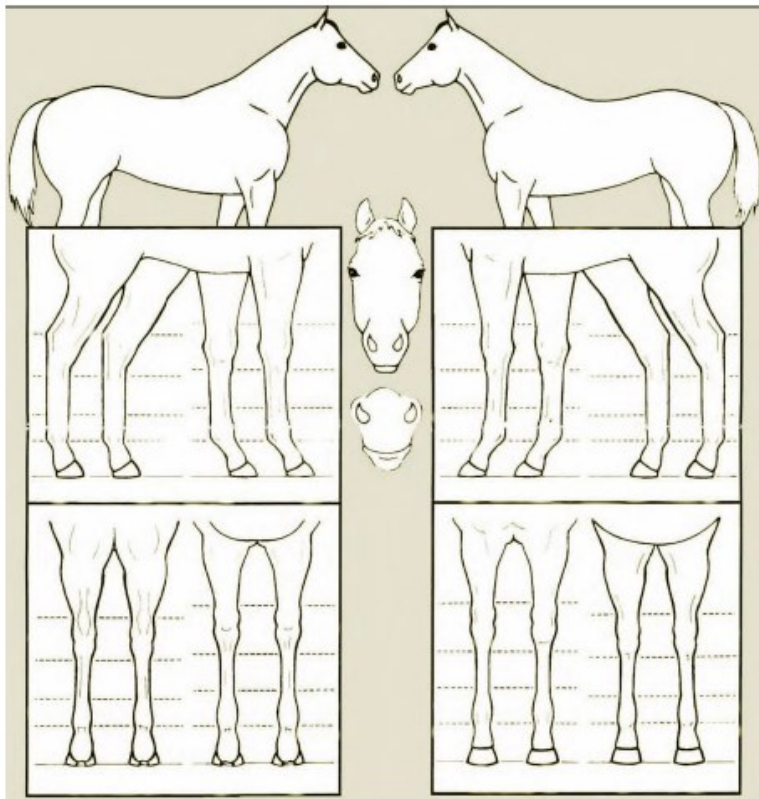
Name of Horse _____ Registration Number _____

Breed _____ Age _____ Sex _____ Colors _____ Weight _____
(mare or gelding)

Name of Sire _____ Name of Dam _____

This form is due to the OCHL or the Owyhee County Extension Office no later than the April OCHL meeting

Indicate all markings in RED ink, and scars and brands in BLUE ink on the diagram. → → →



For any of the following markings:
 registration tattoo, wire cuts, scars, leg markings, brands, etc., mark the diagram.
 Describe these or any other identifying marks below:

- [CHECK ONE]
 This horse is:
- owned by me
 - owned by my family
 - borrowed (If horse is owned by someone other than you or your immediate family, the owner must complete the Owner's Affidavit, below.)
 ↓
 ↓

OWNER'S AFFIDAVIT

As owner of the horse described above, I certify that _____ has my permission to use this animal in the 4-H project. I understand that the 4-H member must manage (including feeding, grooming, exercising, training, stall management, etc.) and have access to this horse at least 75 percent of the time during the course of the project year.
Name of 4-H Member

Date _____ Signature of Owner of Horse _____

Printed Name of Member _____ Signature of Member _____

Signature of Leader _____ Date _____

In addition to the Horse Identification Certificate, please include a photo of your horse from four views.

FRONT

BACK

LEFT

RIGHT

OWYHEE COUNTY 4-H HORSE IDENTIFICATION CERTIFICATE

Year _____

CIRCLE ONE:

Project Horse

Spare Horse

Green Horse

Member's Name _____ Address _____ City _____ State _____ Age as of Jan 1 _____

Name of Other Member if a Joint Project _____ Address _____ City _____ State _____ Age as of Jan 1 _____

Phone _____ E-mail _____ Club _____

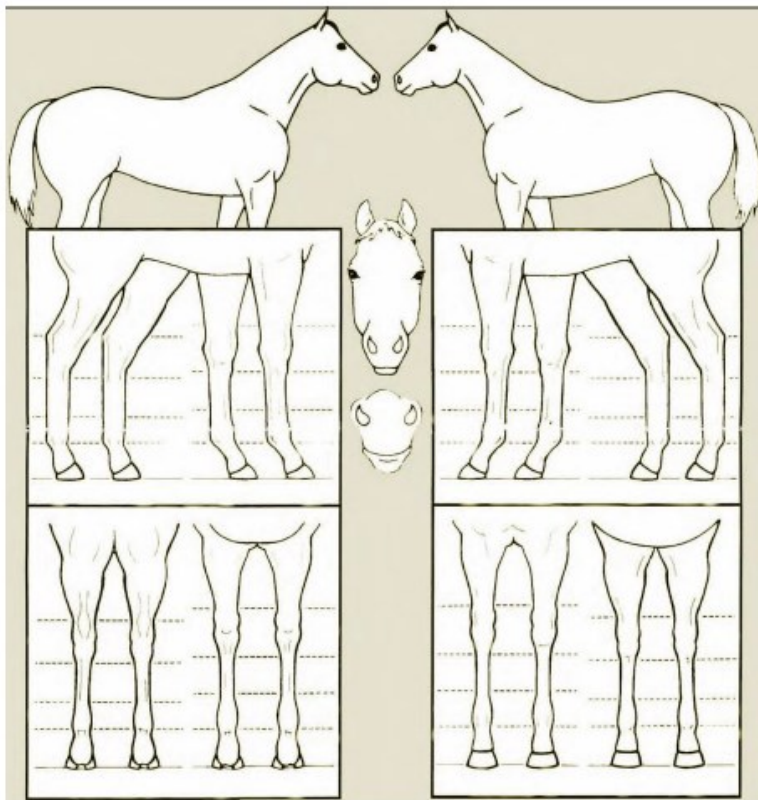
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Breed _____ Age _____ Sex _____ Colors _____ Weight _____
(mare or gelding)

Name of Sire _____ Name of Dam _____

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Date _____ Signature of Owner of Horse _____

Printed Name of Member _____ Signature of Member _____

Signature of Leader _____ Date _____

In addition to the Horse Identification Certificate, please include a photo of your horse from four views.

FRONT

BACK

LEFT

RIGHT

Important Phone Numbers!

Leader: _____

Leader's Phone Number: _____

Owyhee County Extension Educator: _____

Extension Office Phone Number: _____

Farrier: _____

Farrier's Number: _____

Veterinarian: _____

Veterinarian's Phone Number: _____

Rescue Squad/Ambulance: _____



HORSE IDENTIFICATION

Be prepared to identify and prove that you own your horse. Idaho Brand laws require a brand inspection when horses change ownership. Insist on a brand inspection when you purchase a horse. The seller must prove ownership before a Brand Inspector issues a Brand Inspection Certificate. You may apply to any Idaho Brand Inspector for an Ownership and Transportation Certificate ("Lifetime"), which is valid for the lifetime of the horse, as long as you own the horse. The "Lifetime" Certificate allows you to transport your horse to and from any other state. Seasonal Certificates, which expire one year from the date they were issued, are also available. They allow you to transport your horse anywhere in Idaho, or to and from a neighboring state (except Montana). Horses with your brand may be transported within Idaho by having your Idaho Brand card with you. You must give a written permit to anyone who transports your horse when you are not present in the vehicle. Your local Brand Inspector will help you with forms and information, or you may write or stop in to see the State Brand Inspector, 700 S. Stratford Dr., Meridian, ID 83641. The phone number is: 208-884-7070.

The 4-H Pledge:

I pledge My HEAD to clearer thinking,
My HEART to greater loyalty,
My HANDS to larger service, and
My HEALTH to better living,
For my club, my community, my country, and my world.

The 4-H Motto:

"To make the best better."

4-H Colors:

Green and White

