

Lincoln County 4-H Project Record



Horse Project

Name:	
Years in Project:	Years in 4-H:
•	
Planning:	
Explain what you would like to do and learn while cor	mpleting this project. Be sure to tell why you choose to work
on this project this year.	inpletting this project. De sure to tell why you choose to work
on the project the year.	
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Ways You Received Help This Year Include: (check all that apply)

	Attended project training offered in the county
	Attended project training offered at District or State Level
	Guidance from 4-H Leader
(Guidance from Parent
	Reading and use of literature, books, audio visual resources
	Guest presenters
	Own knowledge
	Help from friends/other youth
(Other (describe)

Sharing

How did you share what you learned with others? (Demonstrations, community service, talking to local clubs, helping other youth, Project Discovery Day, district shows, State Fair, Clothing Revue, etc.) **Do not** include Lincoln County Fair.

Date	Activity	Location

Lincoln County Fair Exhibit Record for This Project

What was exhibited	Placing
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Horse Information (The next four pages are required for each animal in your project. Copy as needed.)

Name:	
Age:	
Sex: Male Breed: Purebred	Name of Breed or Breed Mix:
☐ Female ☐ Crossbred	
Height:	Color:
Markings:	
Style of Riding (Check all that apply)	
☐ Huntseast ☐ Saddleseat	☐ Western ☐ Driving
Tuntseast Saddleseat	Western Driving
Ownership (Check one only)	
☐ Personally Owned ☐ Family Owned	☐ Leased ☐ Managerial
Name of Owner if Leased or Managed:	
Attach photo(s) of you and your horse	
Attach photo(s) of you and your norse	·-
Member Signature:	
Parent Signature	
Owner Signature (If leased or managerial)	

Health and Maintenance Record (For this project animal only.)

Foot Care: List all shoeing, trimming and other foot-care costs

Date	Activity / Supplies	Cost

 $\underline{\textbf{De-Worming}}\text{: List each time that your horse was wormed. Include the type/method used.}$

Date	Activity / Supplies	Cost

Vaccinations, Inoculations & Tests

Date	Activity / Supplies	Cost

<u>Miscellaneous</u> <u>Veterinary/Health</u> <u>Items:</u> Include all other vet visits, as well as any first aid or incidental health items, such as eye wipes, ointments, etc

Date	Activity / Supplies	Cost
	Total Health Costs for this Animal this Project Year:	

Record of Time Spent (Record the number of hours spent in each activity for this project animal only.)

	Grooming, Feeding and General Care	Riding, Training	Project Meetings	Total
Jan				
Feb				
Mar				
Apr				
May				
June				
July				
Aug				
Sept				
Oct				
Nov				
Dec				
Total				

Care Describe the normal daily care routine you provide for this horse. Include feed and nutrition (what and how much), exercise, grooming, etc.

Financial Statement

Summarize, totaling all expenses for each project/outing. List any new tools, equipment, materials or supplies, travel costs, any related fees (exhibit or entry fees), etc.

Date	Description of Expense	Total
	Total Health Costs	\$
	Total Tack and Equipment Costs	\$
	Total Feed Costs	\$
	Total Cost of Lessons	\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
	Total Project Expenses	\$

Summary of Finances

Total Project Expenses \$
Fair Premiums (if any) - \$
Total Project Cost \$

Reflecting

- Considering the things you wanted to "do and learn", what did you do and learn?
- The following questions are to guide your thinking as you reflect on the past year in this project. These questions are not meant to be answered by you in a list format. Think about: What didn't go as planned? What did you do about it? What did you learn as a result? What would you do differently? What did you learn about yourself? What skills did you learn? How will you use these skills in other areas of your life? What kind of interaction with adults did you have? How did this help in learning about your project?
 Add a page(s) with pictures or drawings. Pictures or drawings must be captioned.

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