

4-H Horse and Pony Record **Grades 9-12, Senior**



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	Record for	Year		
Name			Grade in School _	
Address(Street, Rural Route		O'.	- Control	7.
(Street, Rural Route)	City	State	Zip
County	Club		Township	
Years in 4-H(including this	Year	rs in Horse and Po	ny	a this areas
This Record is for:	year)		(includin	g tills year)
Name of Animal		Color _	Sex	ζ
Breed or type		Age	Hei	ight
Pedigree (if known)				
		_	(Paternal Gra	andsire)
			(i aternar ere	indon't)
	(Sire)			
		_	(Paternal Gra	anddam)
(Name)	_			
		_	(Maternal Gra	andsire)
	(D)			
	(Dam)			
		_	(Maternal Gra	anddam)
I have reviewed this record and be	elieve it to be corr	rect.		
Signature of Horse and Pony le	ader		Da	te

Purdue University Cooperative Extension Service

Horse Management Worksheet

Hay record

Pasture record (avg. cost of \$.20/day)

Date	Amount Purchased	Cost
	Total Cost (Line 1)	

Month	Days	Cost/day	Total cost
		Total Cost (Line 2)	

Concentrate record

Date	Item purchased	Cost		Date
			1	

Total Cost (Line 3)

Bedding, Board, or Maintenance record

Date	Item purchased	Cost
Date	Item pur chased	Cost
	Total Cost	
	(Line 4)	
	(Line 4)	

Equipment and supplies purchased (Tack, tools, buckets, bedding, etc.)

Date	Item purchased	Cost
	Total Cost	
	(Line 5)	

Summary of I	Direct Expenses
Line 1 (Hay)	
Line 2 (Pasture)	
Line 3 (Concentrate)	
Line 4 (Board, Bedding, Maintence)	
Line 5 (Equipment and Supplies)	
Total Expenses	

Activities in which you partcipated this year with your horse

1.	How much did you personally contribute towards the expenses of keeping this animal?
2.	What would you have done with this amount of money if you were not involved in this project?
3.	What will you change for next year?
4.	What did you learn from this project?

Page 4

4-H Horse and Pony Health Record			
Treatment	Dates	Product Used	Veterinarian's Recommendations
Tetanus toxoid			
Eastern and Western Encephalomyelitis			
Influenza			
Rhinopneumonitis			
Potomac Horse Fever			
Strangles			
Internal Parasites (deworming)			
Coggins test			
Other (i.e. Dental Care)			
(i.e. Dental Care) Attending Veterinarian			Date

The Indiana Veterinary Medical Association (IVMA) Equine Committee Preventative Medicine Program Recommendations:

Tetanus Toxoid: 2 primary injections followed by an annual booster.

Eastern and Western Encephalomyletis (Sleeping Sickness):2 primary injections followed by an annual booster.

Influenza/Rhinopneuminitis (Flu/Rhino): 2 primary injections followed by boosters every 90 days and at least 14 days before show or exposure to other horses.

Deworming: Consult with a veterinarian about products, frequency and rotation for deworming. *Potomac Horse Fever:* Semi annual injections - most important in the spring.

Streptococcus equi (Strangles): Discuss possible vaccinations with your veterinarian.

The IVMA encourages all 4-H horse exhibitors to work with their veterinarians to develop specific preventative medicine programs to ensure the health and welfare of their animals. A client-patient-veterinarian relationship can be a special part of the 4-H experience for young animal exhibitors. In response to requests from many 4-H exhibitors, the IVMA has developed this form to help horse owners better understand their animals' health requirements and document their health care programs.

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