

2018 Jefferson County Dog Project Identification Form

(To be completed by Exhibitor)

Exhibitors: Complete this identification form. Exhibitors, parents/ guardians must read the statement at the bottom of this section and sign to verify reading the 2018 Jefferson County Project Requirements (and 2018 Ohio State Fair Dog Show Rules/Show Venue Rules, if applicable) and agree to abide by them, and having a Permission to Participate form on file in the county Extension office.

Exhibitor's Name _____

County Enrolled in 4-H _____ Phone () _____

Mailing Address _____

City _____ State _____ Zip _____

Dog's Call Name _____

Dog's Birth Date _____ Age _____
Mo./Day/Yr.

Predominant Breed _____

Color & Markings _____

Sex: ☐ Male ☐ Neutered Male ☐ Female ☐ Spayed Female

Dog License Tag No. _____ (Must list tag number)

Signatures Required: We verify we have read the 2018 Jefferson County Project Requirements, and if showing at the OSF, the 2018 Ohio State Fair Jr. Fair Dog Show/Show Venue Rules, and agree to abide by these rules. We have a signed *Permission to Participate in Ohio 4-H Dog Activities Disclosure and Release of Claims* form on file in our county Extension office, and agree to be bound by the terms set forth therein.

Exhibitor's Signature _____

Parent/Guardian Signature _____

Date Signed _____

2018 Permission to Participate in Ohio 4-H Dog Activities Disclosure and Release of Claims

I, _____, have chosen to participate in the Ohio 4-H Dog Program and its related dog activities. I understand that this participation will involve contact with dogs and may give rise to a risk of physical injury. I understand that participation in the 4-H Dog Program is strictly voluntary and is not a requirement for 4-H membership.

I am aware that:

1. Dogs have a tendency to behave in ways that may result in injury to me or other persons in the immediate vicinity;
2. Dogs may react in an unpredictable way to unfamiliar environments, sounds, strange odors, sudden movements, unfamiliar objects, persons, dogs, or other animals;
3. I am to listen to adult volunteers, trainers, coaches, and judges when working with my dog(s) in group settings, and when around other dogs and 4-H members, and people;
4. Other participants in the 4-H Dog Program may fail to maintain control over their dogs or fail to act within their abilities, thus causing harm to me, my dog(s), other participants, volunteers, or spectators;
5. Other participants in an activity, event, or program may act in a negligent manner which otherwise may result in harm to me and/or my dog(s);
6. **I should be aware of my dog's body language and stress indicators at all times while we are participating in 4-H activities;**
7. **I should be able to remove my dog from situations where he/she may respond in a reactive or aggressive manner;**
8. **If I cannot maintain control over a dog I am using for a 4-H project, I understand that I will not be able to use this dog for a 4-H project;** and
9. **If a dog I am using for a 4-H project has been or becomes aggressive toward other people and/or other dogs, I will not be able to continue to use this dog for a 4-H project.**

As a parent or guardian, I have discussed with my child the need to follow all safety procedures, behavior guidelines, and other protocols set forth by adult volunteers, and 4-H dog rules and regulations. I understand that my child will receive assistance from a 4-H volunteer leader when engaged in 4-H club workouts and other similar programs and activities involving 4-H members and dogs. I understand the importance of my child belonging to a 4-H dog club or seeking other socialization and training opportunities for my child's 4-H dog if not enrolled in a 4-H dog club.

In consideration for the opportunity to participate in club, county, regional, and state 4-H dog activities, and the use of services and facilities made available through these 4-H dog activities, I do release and forever discharge for myself and my heirs, executors, administrators, and assigns, the Ohio 4-H Dog Program professional and volunteer leaders, educators, The Ohio State University and its Board of Trustees, its administrators, faculty and staff, from all claims, demands, and causes of action for personal injury or any other damage which may arise out of or be in any way related to my participation in this activity or program.

I understand and agree that my child is capable of being in control of his/her dog(s) at all times. I understand and agree that if a dog my child is currently using, or plans to use, has been or becomes aggressive toward other people and/or dogs I will not allow my child to use this dog as a 4-H project. I understand that my child is not required to participate in any 4-H dog activity, but grant permission for him/her to do so, despite the possible risks. I recognize that by participating in this activity, as with any activity involving live animals, my child, my child's dog(s), other people and/or dogs may risk injury. I hereby attest and verify I have been advised of the potential risks, have sought clarification if I have not understood, that I have full knowledge of the risks involved in these activities, and that I assume any expense that may be incurred in the event of an accident, illness, or other incapacity, regardless of whether I have authorized such expenses. As a parent/guardian, I assume the same risk for myself, and other family members and friends present at these dog activities.

Signed: 4-H Member _____ Date: _____

Signed: Parent or Guardian _____ Date: _____

This 2018 form must be signed and on file in the County Extension Office for EACH youth participant in any 4-H dog program activity where the youth takes a live dog as a project. A current form must be signed EACH year and BEFORE a youth participates in the Ohio 4-H Dog Program activities with their project dog(s).

Return to your County Extension Office by: _____

Parent/Guardian and Club advisors are encouraged to keep a copy.



THE OHIO STATE UNIVERSITY
COLLEGE OF FOOD, AGRICULTURAL,
AND ENVIRONMENTAL SCIENCES



ohio4h.org

CFAES provides research and related educational programs to clientele on a nondiscriminatory basis. For more information: go.osu.edu/cfaesdiversity.

HORSE'S IDENTIFICATION FORM

4-Her's Name _____ County _____

Horse's Name _____ 4H Club Name _____

Horse _____ Pony _____ Height _____ Sex _____ Age _____

Breed or Type (saddle, hunter, stock) _____

Basic Color _____ Face and leg markings _____

☐ Check if horse is leased

Outline with dark solid lines

All white markings. Show all scars and brands.

DRAW IN HEAD MARKINGS

DRAW IN EVERY WHITE AREA

INDICATE ALL DARK SPOTS WITHIN WHITE AREAS

Right Side View

HOCK ANGLE PASTERN

R (4) Hind Legs L (3) L (1) Fore Legs R (2)

Left Side View

HOCK ANGLE PASTERN

L (1) Fore Legs R (2) R (4) Hind Legs L (3)

Rear View

HOCK ANGLE PASTERN

L (3) Hind Legs R (4) L (1) Fore Legs R (2)

Front View

HOCK ANGLE PASTERN

R (2) Fore Legs L (1) R (4) Hind Legs L (3)

PROJECT INFORMATION

NAME _____ DATE OF BIRTH _____
ADDRESS _____ CITY _____ ZIP _____
CLUB NAME _____ YEARS IN 4-H _____
PARENTS' NAME _____ TELEPHONE _____
NAME OF HORSE _____ NUMBER, IF REGISTERED _____
IF REGISTERED, IN WHOSE NAME _____
BREED _____ SEX: MARE _____ GELDING _____ FOAL _____
COLOR: BAY _____ CHESTNUT _____ BLACK _____ GREY _____ SORREL _____ OTHER _____
HORSES AGE _____ CLASS: HORSE _____ PONY _____ HEIGHT _____
FLU VAC _____ RHINO _____ COGGINS _____
RESIDENCE: FARM _____ RNF _____ TOWN _____
LOCATION OF HORSE: _____

"Page 84 of the Fair Book: Possession of animals: Animals must be cared for by the youth member after a project is weighed-in, tagged-in or registered as a project. Animals must be stalled at the Exhibitor's residence (as defined by school registration or driver's license). Any other location must be submitted in writing to the Jefferson County Jr. Fair Committee prior to start of project for approval by the Committee. During the project year, if circumstances require a change in location and/or possession, the same written permission must be submitted and approved. The Stalling location must be within a 30 mile radius of the exhibitor's residence for consideration. Failure to comply with the possession rule will result in the exhibitor being suspended from participating on any level in the Jefferson County Fair for one (1) year."

PLEASE INCLUDE THREE (3) PICTURES OF YOUR HORSE

(Parent Signature)

(Advisor Signature)

(Member Signature)

DUE: JUNE 1st

**PERMISSION TO PARTICIPATE IN 4-H HORSE ACTIVITIES
DISCLOSURE AND RELEASE OF CLAIMS**

I, _____, have chosen to participate in the Ohio 4-H Horse Program and its related horse activities. I understand that this participation will involve contact with horses and may give rise to a risk of physical injury.

I am aware that:

- A. Horses have a tendency to behave in ways which may result in injury, death, or loss to riders, or other persons in the immediate vicinity;
- B. Horses may react in an unpredictable way to sounds, sudden movement, unfamiliar objects, persons, or other animals;
- C. Riding a horse may give rise to a risk of injury from hazards arising from the surface or subsurface of the ground in which these riding activities occur;
- D. While in the vicinity of a horse or while riding a horse, I may be involved in a collision with another horse, another animal, a person, or an object;
- E. Other participants in the program may fail to maintain control over a horse or fail to act within their abilities, thus causing harm to me or other participants; and
- F. Other participants in the program may act in a negligent manner, which could result in harm to me.

As parent or guardian I have discussed with my child the need to behave in a safe manner. I will make sure that my child wears appropriate clothing and footwear during horse activities. I further agree that my child shall be subject to the helmet policy which is reprinted for convenience on the reverse side.

In consideration for the opportunity to participate in club, county, district and state 4-H horse activities and the use of services and facilities made available through these 4-H horse activities, I do release and forever discharge for myself and my heirs, executors, administrators, and assigns, the Ohio 4-H Horse Program professional and volunteer leaders, agents, The Ohio State University and its Board of Trustees, its administrators, faculty and staff, from all claims, demands, and causes of action for personal injury or any other damage which may arise out of or be in any way related to my participation in this activity or program.

I understand that my child is not required to participate in any horse activity, but grant permission for him/her to do so, despite the possible risks. I recognize that by participating in these activities, as with any physical activity, my child may risk personal injury. I hereby attest and verify that I have been advised of the potential risks, that I have full knowledge of the risks involved in these activities, and that I assume any expense that may be incurred in the event of an accident, illness, or other incapacity, regardless of whether I have authorized such expenses. As a parent/guardian, I assume the same risk for myself, and other family members and friends present at these horse activities.

Signed: _____ Date: _____
(4-H Member)

Signed: _____ Date: _____
(parent or guardian)

This form needs to be signed and on file for each youth participant in any 4-H horse program activity. The form needs to be signed each year and before a youth participates in the Ohio 4-H Horse Program Activities.

Under Ohio law, Section 2305.321 of the Revised Code, an equine activity sponsor, professional, volunteer, participant or other person is not liable for an injury to or the death of a participant in the equine activities resulting from the inherent risks of equine activities.

- OVER -

DUE: JUNE 1st

2018 Jefferson County Jr. Fair Rabbit Identification Form

PLEASE PRINT:

Project Name: _____ Project No. _____

Family Name: _____

Member's Name: _____ DOB: _____

Member's Address: _____

4-H Club/FFA Chapter: _____

Parent/Guardian: _____

Class _____ Tattoo# _____
(list all for market)

Buck _____ Doe _____

(Must be accurate)

Rabbit's Age: Jr. (3-8 months) _____ Sr. (9 months or older) _____

Member's Signature: _____

Parent/Guardian Signature: _____

FOR OFFICE USE:

Date form received: _____

Do you need a lower level pen assignment for fair?

_____ Yes _____ No

All pet and market rabbits, except doe and litter, must be tattooed. ID forms for pet rabbits and doe and litter must be received by the Jefferson County Extension Office by June 1, 2018. If tattooed after June 1, tattoo number must be called in to the Jefferson County Extension Office to be added to the previously turned in ID form.

All pet and market rabbits must be brought to tag-in the last Saturday in July. ID forms for market rabbits must be completed and turned in that day. Any pet and market rabbits that have not been previously tattooed will be tattooed that day. All ID forms must include the tattoo number. Rabbits will be checked for disease at tag-in and/or at fair check in.