

CHENANGO COUNTY  
4-H HORSE PROJECT



RECORD BOOK



Name: \_\_\_\_\_

Age: \_\_\_\_\_

Club: \_\_\_\_\_

Leader or Parent Signature: \_\_\_\_\_

## MEMBER INFORMATION

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Member's Name \_\_\_\_\_

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Mailing Address \_\_\_\_\_

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Club Name \_\_\_\_\_

Leader Name \_\_\_\_\_

Office Held \_\_\_\_\_

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Age as of January 1<sup>st</sup> (This Year) \_\_\_\_\_

Years in 4-H Horse Program \_\_\_\_\_

### Activities Participated in ("X")

Horse Bowl [ ]

Hippology [ ]

Horse Judging [ ]

Demonstrations:

Horse Clinic [ ]

Qualifying Shows [ ]

Club [ ]

County [ ]

County Fair [ ]

Required Meetings [ ]

Other 4-H Activities: \_\_\_\_\_

## EQUINE INFORMATION

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Name \_\_\_\_\_

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Registration No. \_\_\_\_\_

Age \_\_\_\_\_

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Sex \_\_\_\_\_

Height \_\_\_\_\_

Weight \_\_\_\_\_

Owned [ ]

Leased [ ]

-

Date of Lease: \_\_\_\_\_

Where Stabled \_\_\_\_\_

Phone: \_\_\_\_\_

## FEED & STABLE MANAGEMENT

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FEED	WINTER Oct. - Feb.	SPRING Mar - May	SHOW SEASON Jun - Sept
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Grain: (pounds per day)

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Hay: (amount per day)

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Supplement  
(pounds per day)

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Pasture: (hours per day)

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Water: (gallons per day)

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## COMPOSITION

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GRAIN	HAY	SUPPLEMENT	PASTURE	WATER
% Protein			(Exercise Only)	(Source)

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## STABLING

Write a brief paragraph describing the stabling facility of your horse, i.e....type of stall, flooring, bedding, exercise area, fencing, feeders, etc.

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HEALTH RECORD

\_\_\_\_\_  
Name of Veterinarian

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

Current Coggins: \_\_\_\_\_

DEWORMING PROGRAM

INNOCULATION PROGRAM

<u>Date</u>	<u>Type</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

<u>Date</u>	<u>Type</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

FARM VISITS

<u>Date</u>	<u>Reason</u>	<u>Treatment</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

FARRIER RECORD

\_\_\_\_\_  
Name of Farrier

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

GENERAL INFORMATION

\_\_\_\_\_  
Size of Shoe

\_\_\_\_\_  
Type of Shoe

\_\_\_\_\_  
Front

\_\_\_\_\_  
Rear



## INCOME & EXPENSE RECORD

From your daily log sheets, fill in the following costs for each month:

	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept
Equip.												
Costs												
Grain												
Hay												
Farrier												
Vet												
Supp												
Riding												
Lessons												
Show												
Fees												
Trucking												
Fees												
Board												
Other												
-----												
Sales												
Income												
Award												
Income												
Misc.												
Income												

### BALANCE SHEET

Value of Horse/Pony at start of Project	\$ _____		Value of Horse/Pony at end of Project	\$ _____
Cost of Feeds & Board	\$ _____		Income from Sales	\$ _____
Cost of Vet Services	\$ _____		Income from Awards	\$ _____
All Other Expenses	\$ _____		Misc. Income	\$ _____
TOTAL EXPENSE	\$ _____		Value of Offspring	\$ _____
			TOTAL INCOME	\$ _____

If your horse's value increased during the year please state why:

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