

**MARYLAND 4-H CLUB
DOG IDENTIFICATION
CARD**



UNIVERSITY OF
MARYLAND
EXTENSION
Solutions in your community

4-H Office Use Only Date Received: _____ _____

Member Identification

Name _____ Birthdate _____

Address _____

Club _____ Phone _____

Project Identification

Name of Dog _____ Birthdate _____

Breed _____ Sex _____ Rabies Expiration Date _____

Rabies Vaccination Number _____

Year(s) that this dog is a project animal
20 _____
20 _____
20 _____
20 _____
20 _____

Owned _____ Leased* _____ (check one) *Signed agreement on file

Club Member _____ Club Leader _____

Signature

Signature

Parent _____

Signature

**File with the Extension Educator one card for each
dog prior to June 1 of the current year.**

The University of Maryland Extension programs are open to any person and will not discriminate against anyone because of race, age, sex, color, sexual orientation, physical or mental disability, religion, ancestry, national origin, marital status, genetic information, political affiliation, and gender identity or expression.