MARYLAND 4-H CLUB DOG IDENTIFICATION CARD



4-H Office Use Only Date Received:	

Mem	ber	Iden	tific	ation
1.1011		IUCI		ation

Name:			Birthdate:			
Address:	ss:					
Club:			Phone Number:			
Project Identification						
Name of Dog:		Bir	thdate:			
Breed:	Breed: Sex		:			
Rabies Vaccir	pies Vaccination #: Ral		pies Expiration Date:			
List the year(s) that this dog has been a project animal:		(Sig	Owned or Leased? (Signed agreement on file for leased animals)			
Club Member	r Signature:					
Club Leader S	Signature:					
Parent Signat	ture:					

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