# Cape May County 4 -H
# Animal Project Record

**Youth Name:** _____ **Years in 4-H?**_____ **4-H Project Year 20___ to 20____**

**Name of 4-H Club:**_____

**Project (List all that apply):**_____

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# Club Meeting Attendance

| Date of Meeting | Date of Meeting | Date of Meeting |
|---|---|---|
|  |  |  |
|  |  |  |
|  |  |  |

# Project-Related Activities
(include all clinics, shows and educational activities attended for this project) )

| Date | Activity/Event | What You Did |
|---|---|---|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# Project Goals

| List 3 project-specific goals you set for yourself at the beginning of the year | Describe how you did or did not do in reaching these goals |
|---|---|
|  |  |
|  |  |
|  |  |

# Animal Care and Management
(Describe the care you provided for your animals)

| Daily | Weekly | Monthly | Yearly |
|---|---|---|---|
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# Animal Inventory

| Breed/Species | Description (Color, Size, Weight, etc.) | Sex | Date Born | Date Purchased, Rescued, or Gifted | Animal Value Purchase Price (if any) |
|---|---|---|---|---|---|
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| | | | | | |

# Project Feed Expenses

| Date | Type of Feed | Cost |
|------|--------------|------|
|      |              |      |
|      |              |      |
|      |              |      |
|      |              |      |
|      |              |      |
|      |              |      |
|      |              |      |
|      |              |      |
|      |              |      |
|      |              |      |
|      |              |      |
|      |              |      |
|      |              |      |
|      | TOTAL        |      |

# Other Project Expenses

| Date | Equipment, Show Expenses, etc. | Cost |
|------|-------------------------------|------|
|      |                               |      |
|      |                               |      |
|      |                               |      |
|      |                               |      |
|      |                               |      |
|      | TOTAL                         |      |

# Health Management Practices

| Date | Animal | Health Services Provided | Cost |
|------|--------|--------------------------|------|
|      |        |                          |      |
|      |        |                          |      |
|      |        |                          |      |
|      |        | TOTAL                    |      |

# Profit/Loss

| | |
|--|--|
| Total of all Expenses | |
| Any Income | |
| Profit Loss | |

# Project Evaluation

What did you most enjoy about your 4-H Club?

What is something that could be improved with your 4-H Club?

What did you learn from your project?

Name one way you can apply the knowledge from your project to future 4-H projects and/or life goals?

What else would you like to share about your project?
(Attach pages as necessary for photos or anything else you would like to show.)

# Parent/Guardian Comments

_____       _____

Parent/Guardian Signature            Date

# Club Leader Comments

_____       _____

Club Leader Signature            Date

# Photos