# **Prospect Yearling Certificate 2025**

DUE IN EXTENSION OFFICE BY 5:00 PM APRIL 1, 2025 FILLED OUT <u>COMPLETELY</u> AND <u>SIGNED BY CLUB LEADER</u>, <u>NO EXCEPTIONS</u>

## **INSTRUCTIONS**

### **4-H/FFA Member**

This certificate is to certify that this animal is the 4-H/FFA project of <u>**THIS MEMBER ONLY</u>**. The member may be asked to present it at 4-H/FFA fairs and horse shows for identification of the animal. This certificate is valuable and important and should be kept in a safe place.</u>

#### 4-H Leader

This certificate should be given out to the members early in the **4-H/FFA** year. Members should be instructed on how to fill out this certificate and of its importance. Have the members fill it out and return it in plenty of time for you to sign it and <u>get it to the Lea County Extension office by April 1, 2025</u>

**Extension Agent/FFA Advisor** Sign each certificate and keep a copy for your file and give a copy to the leader.

#### IF MORE THAN ONE PERSON IS ENTERED ON THIS HORSE, THE HORSE WILL BE DISQUALIFIED

<b>ONE PERSON PER HORSE</b>	<b>ONE PERSON PER HORSE</b>
4-H/FFA Member's Name	Name of Horse
Address	Date Horse Born       Month       Day       Year         Mare       Gelding       Image: Control of the second
ADDRESS WHERE HORSE IS KEPT	Color of Horse
Phone Number	Breed Name of Sire
Email	Name of Dam
Name of Club	BREEDER Registration #
County	Please fill out front and back of this form

completely!!

Draw and/or attach photo of color markings on each side, legs and face

 When was this horse acquired for your 4-H/FFA project? Month \_\_Year \_\_\_\_

 Was this your project animal last year? \_\_\_\_\_\_

 Number of years you have had this animal as 4-H/FFA project \_\_\_\_\_\_

 Date filed in county office \_\_\_\_\_\_

 Signature of County Agent or FFA Advisor \_\_\_\_\_\_

 I certify that this is a 4-H/FFA project this year and that the above information is correct to the best of my knowledge.

 Signature of 4-H or FFA member \_\_\_\_\_\_

 Signature of 4-H leader or FFA advisor \_\_\_\_\_\_\_

 Signature of parent or guardian \_\_\_\_\_\_\_

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