4-H Horse Registration
(This form needs to be returned by May 1 to the MSU Extension Office)

4-H Member’s Name__________________________________________________________

Address (include city, state, zip)_____________________________________________________

Current 4-H Age_________ No. of year in 4-H_________ No. of years in project__________

Leader____________________________________ Club Name________________________________

Description of horse being used in project:

Name of horse_______________________________________________________________

Breed______________________________________________________________

Registered________________________ Registration Number__________________________

Original date of Coggins test____________________________________________________

Year foaled_________ Color_________ Height_______ Weight_______

Owned by 4-H member alone?______ Family______ Someone else__________

What kind of training has your horse had prior to this year?_____________________________

_________________________________________________________________________

Are you interested in showing at the State Show? Yes____ No____

Leader Approval __________________________ Letter of recommendation yes ___ no ___

Parent consent _________________________________________________________________

(Picture of your horse)

If the MSU Extension office already has a picture of your horse from Previous years please mention it here and we will use that one.