

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



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 _____

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

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