

**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

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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