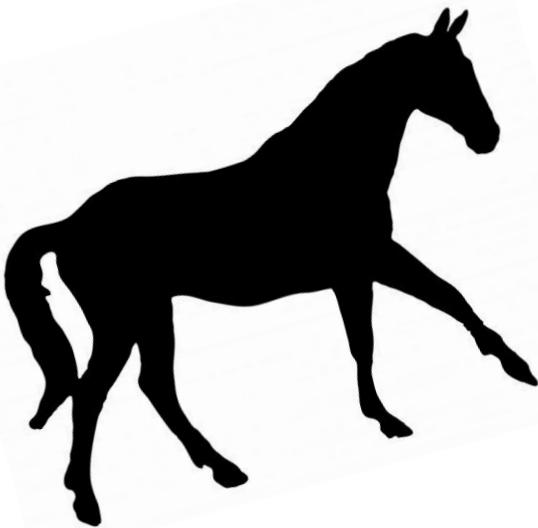# 2025-2026
Door County
4-H Horse
&
Pony Project
Record Book

Name _____

4-H Club _____

Age _____   Grade _____   Phone Number _____

E-Mail _____

Horse's Name _____

Use one record book for each project animal!

GOAL SETTING

We encourage each of our Project Members to set goals at the beginning of the 4-H year. Goal setting helps you to focus on what you'd like to do, and allows you to develop steps to reach those goals. Your goal should be achievable, but challenging. Record your top 3 goals below and use this sheet to track your achievements from October 1, 2025 to July 15, 2026.

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For example, you could set a goal of having your horse pick up correct leads every time when asked; to get past a shying from flag problems, to walk into the trailer without hesitation. Or, you could set higher goals such as qualifying for State Expo, or placing top ten at Gymkhana. Make sure your goals are within your reach!

DOOR COUNTY 4-H
PROJECT BOOK I.D. SHEET
(Attach a copy of Negative Coggins Test)
One clear, colored photograph of the animal must be attached.

4-H MEMBER INFORMATION   **Circle one: regular member   horseless member**

Name _____

Address _____

Phone Number(s) _____

E-Mail _____

Grade (as of Jan. 1) _____   4-H Club _____

HORSE INFORMATION

Name of Horse _____

Sex _____   Age _____   Height in Hands _____

Breed or Type _____   Registration # _____
(Attach a copy of registration papers)

Brief Description _____

Premise ID# _____

Ownership (Circle one):   Personally Owned   Family Owned   Non-Family Owned

If Non-Family owned, list:

Owner's name _____   Phone number _____

FEEDING RECORD
March 1 through July 15

	MARCH	APRIL	MAY	JUNE	JULY 1-15	TOTAL USED	TOTAL COST
Grain / Amount							
$ Grain/Month							
Bales of Hay/Month							
$ Bales of Hay/Month							
Cost of Salt & Additive/Month							

A. FEEDING COSTS: $_____

DESCRIPTION OF FEED AND SUPPLEMENTS

Grain: Whole Oats _____   Crimped Oats _____   Crushed Oats _____   Corn _____

Barley _____   Commercial Feed _____ (Give analysis or attach a tag from the bag)

Other (list) _____

Hay: Alfalfa _____   Timothy _____   Clover _____   Orchard Grass _____

Brome Grass _____   Mixed Hay _____   Other (Give Name) _____

Supplements: Vitamins (What Kind) _____   Corn Oil _____

Salt _____   Wheat Germ Oil _____   Linseed Meal _____   Bran _____   Molasses _____

Other (list) _____

EQUINE HEALTH RECORD

Owner _____ Name _____

Address _____ Date Foaled _____ Sex ____ Ht. ____ Wt. ____

City _____ State _____ Breed _____

Zip _____ Dam _____ Sire _____

Phone _____ Registration &/or Tattoo #_____

VACCINATION HISTORY
October 1, 2025 thru July 15, 2026

DISEASE	DATES OF BOOSTER			COST
Encephalomyelitis				
Influenza				
Rhino pneumonitis				
Strangles				
PHF				
Rabies				
Tetanus				
Other				

B. VACCINATION COSTS $_____

DEWORMING HISTORY
October 1, 2025 thru July 15, 2026

PRODUCT	DATE	COST

C. DEWORMING COSTS $_____

Date of Fecal Exam					

DENTAL PROCEDURES
October 1, 2025 thru July 15, 2026

Date		Date	

D. DENTAL COSTS $_____

SUBTOTAL COSTS (B-D) $_____

HOOF CARE PROCEDURES
October 1, 2025 thru July 15, 2026

Date	Procedure	Cost	Date	Procedure	Cost

E. HOOF CARE COSTS $_____

MEDICAL HISTORY
October 1, 2025 thru July 15, 2026

Date	Symptoms / Diagnosis / Treatment	Cost

F. MEDICAL CARE COSTS $_____

(Add additional sheets, if you need more space.)

Now add everything together:
    A. Feeding Costs   _____
    B. Vaccination Costs   _____
    C. Deworming Costs   _____
    D. Dental Costs   _____
    E. Hoof Care Costs   _____
    F. Medical Care Costs   _____

GRAND TOTAL -- ALL COSTS (A-F) .... $_____

TACK AND EQUIPMENT INVENTORY
October 1, 2025 thru July 15, 2026

Check all items owned. Do not overlook such items as combs, brushes, buckets, leads, etc. Indicate the condition of **ALL** items (excellent, good, fair) and include items purchased or added during this project year.

ARTICLES OWNED	CONDITION (Ex, Good, Fair)	COST (For items added this year)	ARTICLES OWNED	COST CONDITION (Ex, Good, Fair)	(For items added this year)
GENERAL			**TACK**	_____	_____
Halter	_____	_____	Saddle	_____	_____
Lead Shank	_____	_____	Saddle Pad/Blanket	_____	_____
Sheet	_____	_____	Breast Plate	_____	_____
Blanket	_____	_____	Bridle	_____	_____
Cooler	_____	_____	Extra Bits	_____	_____
Shipping Boots	_____	_____	Harness	_____	_____
Bandages	_____	_____	Surcingle	_____	_____
Longe Line	_____	_____	Leather Punch	_____	_____
Longe Whip	_____	_____	Crop, Whip or Bat	_____	_____
Other	_____	_____	Bosal	_____	_____
			Bareback Pad	_____	_____
			Spurs	_____	_____
GROOMING			Stall Guard	_____	_____
Soft Brush	_____	_____	Hay Net	_____	_____
Hard Brush	_____	_____	Saddle Rack	_____	_____
Curry Comb	_____	_____	Tack Box	_____	_____
Hoof Pick	_____	_____	Saddle Soap	_____	_____
Shedding Blade	_____	_____	Buckets	_____	_____
Sweat Scraper	_____	_____	Other	_____	_____
Sponges	_____	_____			
Scissors	_____	_____	**MEDICAL AIDS**	(Do you have this in your 1st Aid Kit?)	
Clippers	_____	_____	Hoof Conditioner	_____	_____
Buckets	_____	_____	Antibacterial Soap	_____	_____
Water Brush	_____	_____	Antiseptic Salve	_____	_____
Shampoo	_____	_____	Cotton	_____	_____
Wash Rags	_____	_____	Alcohol	_____	_____
Other	_____	_____	Liniment	_____	_____
			Colic Medication	_____	_____
			Thermometer_____		_____
RIDING CLOTHES			Fly Repellent	_____	_____
Boots	_____	_____	Other	_____	_____
Stable Boots	_____	_____			
Hats	_____	_____	**BEDDING**		
Show Outfit	_____	_____	Sawdust	_____	_____
Chaps	_____	_____	Straw	_____	_____
Other	_____	_____	Shavings	_____	_____
	_____	_____	Other (Type)	_____	_____
	_____	_____			
	_____	_____	**MISCELLANEOUS**		
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

TOTAL EXPENSES   _____

DIARY OF TIME SPENT ON MY 4-H PROJECT & ACTIVITIES
October 1, 2025 thru July 15, 2026

This year, my horse and I participated in the following Door County 4-H Horse & Pony Events:

- ☐ Clinic:_____
- ☐ Clinic: _____
- ☐ Clinic: _____
- ☐ Spring Fun Show
- ☐ Friday Night Lights
- ☐ July Prep Day
- ☐ Junior Fair Pleasure Show
- ☐ Open Fair Pleasure Show
- ☐ Junior Fair Gymkhana Show
- ☐ Fall Fun Show
- ☐ Drill Team

In addition, we also attended or participated in these events:

- ➢ _____
- ➢ _____
- ➢ _____
- ➢ _____
- ➢ _____
- ➢ _____
- ➢ _____
- ➢ _____
- ➢ _____

In the space below, please specifically indicate each day, the amount of time and the type of work you did with your project animal. Categories you can use for describing the work include but are not limited to: Grooming, Feeding, Tack Care, General Care, Riding, Training, Meetings and 4-H Project Activities. **The time period to be documented is from October 1, 2025 thru July 15, 2026.** Use additional pages if necessary. Two pages are provided for your use.

Example:
 April 23- 1 hour grooming, 1/2 hour tack care, 2 hours riding

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Diary of Time Spent (continued)

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TOTAL HOURS _____

AWARDS RECEIVED THIS YEAR
October 1, 2025 thru July 15, 2026
(Specify 4-H or Open)

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ACTIVITY STORY

Write about the horse-related activities that you participated in this year. What was the result of your participation? (i.e. What did you learn or earn? What are the most important effects that your 4-H experience has had on you this year?)

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PARENT / LEADER EVALUATION

A. Parent evaluation of 4-H work and <u>Signature</u>. Discuss what your son/daughter accomplished in this project this year.

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Signature _____

B. 4-H Club Leader Comments and <u>Signature</u>

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Signature _____

C. Horse & Pony Project Chair Comments and <u>Signature</u>

_____

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Signature _____

PHOTOGRAPHS
(Do Not Attach Extra Pages)

REQUEST FOR FUNDING
STATE EXPO AND/OR GYMKHANA

Use this form to request funding from the 4-H Horse & Pony Project to help you compete at the State Expo or State Gymkhana competition. **Exhibitors must adhere to the following requirements:**

➢ Attend at least two (2) Horse & Pony Project meetings prior to the Fair. College students must attend one (1) meeting prior to the Fair (during the current 4-H year).
➢ Sixteen (16) hours of **HORSE-RELATED** volunteer work of your choice at a show, clinic, fair or workday. College students must volunteer eight (8) hours (hours must be recorded on Volunteer Hours-Record Sheet.
➢ Exhibit their animal at the Fair, and follow all Fair rules.
➢ Complete and turn in all registration information, funding requests, volunteer hours and Project Record Books on or before **August 31, 2026** to the Extension Office.
➢ Our website https://doorcounty4hhorseandpony.webs.com/

A special meeting may be held for those who need to turn in forms, funding requests, volunteer hours and record books.
Members will...
- turn in completed Expo and/or Gymkhana forms
- turn in completed Volunteer Hours-Record Sheet
- turn in completed Record Books

❧ Funding is available to those riders who participate by showing their animal in the Expo, Gymkhana, Dressage or State Fair (funding will be issued after the events).
❧ Record Books are available at http://doorcounty4hhorseandpony.webs.com/ or http://door.uwex.edu/4-h-youth-development/

I am requesting funding for the following:

☐ **State Gymkhana**   ☐ **State Dressage**

☐ **4-H State Horse Expo**   ☐ **State Fair**

Name _____

4-H Club _____

Address _____

_____

Phone _____ E-Mail _____

Signature _____

Date _____

DOOR COUNTY 4-H HORSE & PONY PROJECT
VOLUNTEER HOURS – INDIVIDUAL RECORD SHEET
OCTOBER 1, 2025 through AUGUST 13, 2026

Note: Deadline for submitting hours is August 31, 2026

Name _____

Address _____

Phone Number(s) _____

E-Mail _____

4-H Club _____

- ➢ Sixteen (16) total hours of **HORSE RELATED** volunteer work of your choice at a show, clinic, fair, or workday; college students must volunteer eight (8) hours; of these required volunteer hours, twelve (12) hours [six (6) hours if a college student] must be at a **4-H EVENT** such as shows, clinics, fair, or workdays.

- ➢ An ADULT will need to initial the activity; if there is any question, the adult may be contacted for verification purposes.

DATE	ACTIVITY	TIME	ADULT INITIALS

TOTAL HOURS _____

DOOR COUNTY 4-H
PROJECT BOOK I.D. SHEET
(Attach a copy of Negative Coggins Test and Premise ID number)
One clear, colored photograph of the animal must be attached.

4-H MEMBER INFORMATION   Circle one: regular member   horseless member

Name _____

Address _____

Phone Number(s) _____

E-Mail _____

Grade (as of Jan. 1) _____   4-H Club _____

HORSE INFORMATION

Name of Horse _____

Sex _____   Age _____   Height in Hands _____

Breed or Type _____   Registration # _____
(Attach a copy of registration papers)

Brief Description _____

Premise ID# _____

Ownership (Circle one):   Personally Owned   Family Owned   Non-Family Owned

If Non-Family owned, list:

Owner's name _____   Phone number _____

THIS SHEET MUST BE TURNED INTO THE EXTENSION OFFICE BY <u>JULY 1st.</u>