4-H Breeding Swine Declaration Form

This form **MUST** be signed by youth, parent, and leader and returned to the Humboldt County Extension Office by **June 1**.

County: ____________________________ Date: __________

Name: ____________________________ Club Name: ____________________________

Address: __________________________ City: __________________________ Zip: ______

Telephone: ( ) ________________ E-mail: __________________________

Youth Signature

_________________________________________________

Parent or Legal Guardian Signature

_________________________________________________

Leader Signature

This form must be returned to the Humboldt County Extension Office by **JUNE 1**.

<table>
<thead>
<tr>
<th>Animal</th>
<th>Ear Tag Number</th>
<th>Tag Color</th>
<th>Breed</th>
</tr>
</thead>
<tbody>
<tr>
<td>January-February Gilt</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>March-April-May Gilt</td>
<td></td>
<td></td>
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</tbody>
</table>