KLICKITAT COUNTY 4-H

Dog Project Record

**Information about your dog:**

My dog’s name is:

Age:  Birthday: Color:

Sex: Male Female Main Breed:  Purebred: YES NO

My dog is registered in the American Kennel Club: YES NO Crossbred: YES NO

Other:  YES NO Microchipped: YES NO Reg. #:  YES NO Level in Obedience:

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|  | **Vaccination** | **Date Given**YOU MAY ATTACH A PHOTO OF YOUR DOG OR YOU AND YOUR DOG IN THIS SPACE |
|  | Distemper |  |
|  | Adenovirus 2 |  |
|  | Parainfluenza |  |
|  | Parvovirus |  |
|  | Leptospira |  |
|  | Coronavirus |  |
| Exp.Date: |  Serial # |  |
| Adm. By: |  |  |
|  | Bordatella |  |
| Exp.Date: |  Serial # |  |
| Adm. By: |  |  |
|  | Rabies |  |
| Exp.Date: |  Serial # |  |
| Adm. By: |  |  |

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| **Record of Training Completed:** Date completed |  |  |
| **Training** |  | **Training** |  | **Training** |  |
| Heel on the leash |  | Sit up |  | High Jump |  |
| Heel off the leash |  | Catch |  | Broad Jump |  |
| Come when called |  | Fetch |  | Directed Jumping |  |
| Sit |  | Carry |  | Hand Signals |  |
| Sit and stay |  | Roll over |  | Scent Discrimination |  |
| Lie down |  | Jump |  | Moving Stand |  |
| Down and stay |  | Drop on recall |  | Take |  |
| Come |  | Hold |  | Go |  |
| Halt |  | Give |  | A-frame |  |
| Figure 8 |  | Retrieve on Flat |  | Dog Walk |  |
| Stand |  | Retrieve over Jump |  | See-Saw |  |
| Stand for Exam |  | Out of Sight Long Sit |  | Tunnel |  |
| Stay |  | Out of Sight Long Down |  | Chute |  |
| Recall |  | Bar Jump |  | Panel Jump |  |
| Finish |  | Directed Retrieve |  | Double Jump |  |
| **Veterinary Records** |
| **Date** | **Service Performed** | **Cost** |
|  | Parasite control |  |
|  |  Internal |  |
|  |  External |  |
|  | Other |  |
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| **Equipment Needed for Project** |
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**Exhibit Record**

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| --- | --- | --- | --- | --- |
| **Date** | **Name of Show** | **Class** | **Number in class** | **Placing** |
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**SUMMARY OF EXPENSES BY MONTH**

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| --- | --- | --- | --- | --- | --- | --- |
| **Months** | **Food** | **Equipment** | **Vet Services** | **List Other Items** | **Amount** | **Monthly Total** |
| October | $ | $ | $ |  | $ | $ |
| November | $ | $ | $ |  | $ | $ |
| December | $ | $ | $ |  | $ | $ |
| January | $ | $ | $ |  | $ | $ |
| February | $ | $ | $ |  | $ | $ |
| March | $ | $ | $ |  | $ | $ |
| April | $ | $ | $ |  | $ | $ |
| May | $ | $ | $ |  | $ | $ |
| June | $ | $ | $ |  | $ | $ |
| July | $ | $ | $ |  | $ | $ |
| August | $ | $ | $ |  | $ | $ |
| September | $ | $ | $ |  | $ | $ |
| Total Cost | $ | $ | $ |  | $ | $ |