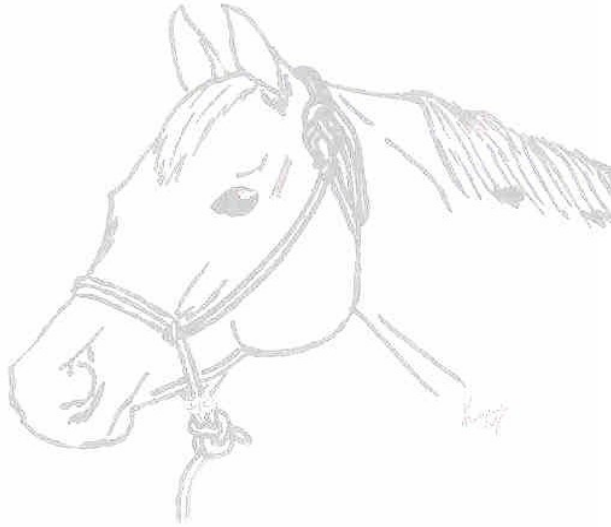


# Montcalm County



## Horse and Pony Project Record Book (16 -19 years old)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

4-H Club: \_\_\_\_\_

4-H Leader: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ 4-H Age (as of 1/1): \_\_\_\_\_

Exhibitor #: \_\_\_\_\_ Years in 4-H Horse/Pony Project: \_\_\_\_\_

Date Record Began: \_\_\_\_\_ Date Record Completed: \_\_\_\_\_



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UNIVERSITY | **Extension**



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Rev. 4/2016

## Project Requirements

### Objectives:

1. Learn and apply recommended principles of horsemanship and horse science.
2. Demonstrate knowledge of sound feeding and management practices.
3. Develop integrity, sportsmanship, and decision-making skills.
4. Explore career, job, and leisure opportunities.

### Instructions:

Record keeping is a vital part of an equine project. 4-H'ers should be able to account for all costs associated with their horse/pony project as well as monitor items such as feed utilization/consumption, animal health and the amount of time spent with the horse/pony project. Project record keeping is designed to give 4-H'ers a well-rounded understanding of their equine project.

- Photo(s) must clearly show the full body view of the horse(s)/pony(s).
- The description of the horse(s)/pony(s) must be written using proper terminology.
- Health records should begin on September 1<sup>st</sup> of the current year and end when the record book is considered complete.
- Include a copy of your horse's/pony's Coggins test results at the end of the record book.
- The Horse/Pony Record Book must be submitted in a binder or note book. **No loose pages.**
- **All signatures are required** on the "signature pages". The parent signature may be waived if the 4-H member is 18 years of age or older.

#### MSU Montcalm Extension

211 W. Main Street, P.O. Box 368

Stanton, Michigan 48888

<http://msue.anr.msu.edu/county/info/montcalm>

Phone: (989) 831-7500

Fax: (989) 831-7515

**Member Statement:** I hereby certify that I have personally kept the records on this project and have personally completed this record book.

**4-H Member Signature:** \_\_\_\_\_

**Record Approval:** The 4-H member has completed this record book to a satisfactory level.

**Parent/Guardian Signature:** \_\_\_\_\_

**4-H Horse Leader's Signature:** \_\_\_\_\_

## Determining Skill Level Placement

- Leaders should use the following checklist to determine skill level placement
- When a rider has mastered all the skills at their level and 50% of the skills on the next level, they may move up and continue to work on the remaining skills.
- Put a checkmark next to the riding level the 4-H'er will be riding at.

Rider Name: \_\_\_\_\_

Date: \_\_\_\_\_

### All riders must demonstrate the basic ring etiquette guidelines as listed below:

\_\_\_\_\_ Knows when and how to pass safely

\_\_\_\_\_ Remains on the rail

\_\_\_\_\_ Moves in and out of a crowd safely

\_\_\_\_\_ Maintains proper distance around other Horses/Ponies

#### \_\_\_\_\_ **WALK/TROT:**

\_\_\_\_\_ Leads safely

\_\_\_\_\_ Stops with control

\_\_\_\_\_ Mounts and settles horse/pony

\_\_\_\_\_ Executes a 90 degree turn on the haunches

\_\_\_\_\_ Dismounts safely

\_\_\_\_\_ Maintains a controlled walk

\_\_\_\_\_ Ties with a quick-release knot

\_\_\_\_\_ Backs at least 4 steps

\_\_\_\_\_ Maintains a controlled trot

#### \_\_\_\_\_ **NOVICE – All previous plus:**

\_\_\_\_\_ Lopes a controlled small circle

\_\_\_\_\_ Recognizes correct leads

\_\_\_\_\_ Recognizes diagonals

\_\_\_\_\_ Recognizes gaits

#### \_\_\_\_\_ **INTERMEDIATE – All previous plus:**

\_\_\_\_\_ Executes a 180 degree turn on the haunches and forehand

\_\_\_\_\_ Maintains correct leads on the rail

\_\_\_\_\_ Lengthens the walk

\_\_\_\_\_ Lengthens the trot

\_\_\_\_\_ Executes simple lead changes

\_\_\_\_\_ Backs and "L"

\_\_\_\_\_ Performs a figure 8 with lead changes

\_\_\_\_\_ Transitions from walk to lope

#### \_\_\_\_\_ **ADVANCED – All previous plus:**

\_\_\_\_\_ Side passes

\_\_\_\_\_ Hand gallops with control

\_\_\_\_\_ Serpentine at the trot

\_\_\_\_\_ Back through figure 8

\_\_\_\_\_ Executes a 360 degree turn on the haunches and forehand

\_\_\_\_\_ Counter canters

\_\_\_\_\_ Flying lead changes (*optional*)

Horse Leader's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Evaluator's Signature: \_\_\_\_\_

Date: \_\_\_\_\_





## Horse/Pony Health

<b>Veterinarian Name:</b>	<b>Phone Number:</b>
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### My Horse's/Pony's Vital Signs:

Temperature:	Respiration:	Pulse:
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### Immunizations:

- Please consult your veterinarian for the shots he/she recommends for your horse/pony.
- **Include a copy of immunization documentation at the end of the record book.** *(This can be a receipt of the purchase of the vaccinations, if self-administrated.)*

Date:	Common Name	Vaccine Description	Cost	Administered by:
				<input type="checkbox"/> vet <input type="checkbox"/> self
				<input type="checkbox"/> vet <input type="checkbox"/> self
				<input type="checkbox"/> vet <input type="checkbox"/> self
				<input type="checkbox"/> vet <input type="checkbox"/> self
				<input type="checkbox"/> vet <input type="checkbox"/> self
				<input type="checkbox"/> vet <input type="checkbox"/> self
				<input type="checkbox"/> vet <input type="checkbox"/> self

### Coggins Test: *(Attach a copy of your horse's/pony's Coggins test at the end of the record book.)*

Date of Test:	Cost:
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### Deworming:

Date:	Product Name/Brand:	Cost:	Type:
			<input type="checkbox"/> Daily <input type="checkbox"/> Paste <input type="checkbox"/> Tube
What parasites are eliminated by this product?			
			<input type="checkbox"/> Daily <input type="checkbox"/> Paste <input type="checkbox"/> Tube
What parasites are eliminated by this product?			
			<input type="checkbox"/> Daily <input type="checkbox"/> Paste <input type="checkbox"/> Tube
What parasites are eliminated by this product?			
			<input type="checkbox"/> Daily <input type="checkbox"/> Paste <input type="checkbox"/> Tube
What parasites are eliminated by this product?			
			<input type="checkbox"/> Daily <input type="checkbox"/> Paste <input type="checkbox"/> Tube
What parasites are eliminated by this product?			

Why do you de-worm your horse/pony? \_\_\_\_\_

How often do you de-worm? \_\_\_\_\_

**Exams, Illnesses and Injuries:**

Give information relating to any treatment administered to your horse/pony either by yourself or your veterinarian. Include medicine, amount and frequency.

Date:	Wellness Exam, Illness, Injury description, chiropractic work, etc.	Treatment/Care:	Results

How did you maintain your horse's/pony's health if you did not have any wellness exams, illnesses or injuries?

**Dental Care:**

<b>Equine Dentist's Name:</b>	<b>Phone Number:</b>
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Date:	Describe Procedure Done and Results:	Cost:

**Hoof Care:**

<b>Farrier's Name:</b>	<b>Phone Number:</b>
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Date:	Work Performed:	Cost:
	<input type="checkbox"/> Shoes <input type="checkbox"/> Trim <input type="checkbox"/> Treatment <input type="checkbox"/> Other - Describe:	
	<input type="checkbox"/> Shoes <input type="checkbox"/> Trim <input type="checkbox"/> Treatment <input type="checkbox"/> Other - Describe:	
	<input type="checkbox"/> Shoes <input type="checkbox"/> Trim <input type="checkbox"/> Treatment <input type="checkbox"/> Other - Describe:	
	<input type="checkbox"/> Shoes <input type="checkbox"/> Trim <input type="checkbox"/> Treatment <input type="checkbox"/> Other - Describe:	
	<input type="checkbox"/> Shoes <input type="checkbox"/> Trim <input type="checkbox"/> Treatment <input type="checkbox"/> Other - Describe:	
	<input type="checkbox"/> Shoes <input type="checkbox"/> Trim <input type="checkbox"/> Treatment <input type="checkbox"/> Other - Describe:	
	<input type="checkbox"/> Shoes <input type="checkbox"/> Trim <input type="checkbox"/> Treatment <input type="checkbox"/> Other - Describe:	

## Worksheet-How to calculate Monthly Cost of Feeds

This worksheet provides you with the formula and practice on calculating how much you spend per month on feed. This information is needed to complete page 8. *If you feel comfortable with this calculation, you do not need to complete this page just move on to page 8.*

### Grain:

Cost of a bag of grain: \$ \_\_\_\_\_ ÷ \_\_\_\_\_ lbs. in the bag = \$ \_\_\_\_\_ per lbs.

Amount fed: \_\_\_\_\_ lbs. per day X \_\_\_\_\_ days (in month) = \_\_\_\_\_ lbs.

Monthly cost of grain: \$ \_\_\_\_\_ X \_\_\_\_\_ lbs. =   
(Cost per lb.) (Total amount fed) (Monthly cost of grain)

### Hay:

Cost of a bale of hay: \$ \_\_\_\_\_ ÷ \_\_\_\_\_ lbs. per bale = \$ \_\_\_\_\_ per lbs.

Amount fed: \_\_\_\_\_ lbs. per day X \_\_\_\_\_ days (in month) = \_\_\_\_\_ lbs.

Monthly cost of hay: \$ \_\_\_\_\_ X \_\_\_\_\_ lbs. =   
(Cost per lb.) (Total amount fed) (Monthly cost of hay)

### Supplements:

Cost of the jar of supplements: \$ \_\_\_\_\_ ÷ \_\_\_\_\_ oz. in container = \$ \_\_\_\_\_ per oz.

Amount fed: \_\_\_\_\_ oz. per day X \_\_\_\_\_ days (in month) = \_\_\_\_\_ oz.

Monthly cost of supplements: \$ \_\_\_\_\_ X \_\_\_\_\_ lbs. =   
(Cost per oz.) (Total amount fed) (Monthly cost of supplements)

### Pasture:

Pasture costs money! Maintaining pasture requires fertilizer, lime, seed, mowing (hiring someone or buying diesel for the tractor), repairing fence boards, etc. If you'd like to estimate the cost of providing pasture for your horse/pony, take the dollars spent on these items each month and divide by the number of horse(s)/pony(s) that use that pasture.

(Dollars spent)

(Number of horses/ponies)

(Monthly cost of pasture)



## Horse/Pony Feeding/Care Record

### Feed/Care Cost per Month

Do you board your project horse/pony?  Yes  No (If boarding, please work with your stable manager to determine these values.)

	Grain	Amount	Cost	Hay	Amount	Cost	Pasture	Cost	Other Bedding	Cost	Monthly Total
<i>Example:</i>	<i>Sweet Feed</i>	<i>60 lbs.</i>	<i>\$12.00</i>	<i>Orchard Grass</i>	<i>20 Bales</i>	<i>\$80.00</i>	<i>Pasture</i>	<i>\$30.00</i>	<i>Biotin</i>	<i>\$7.00</i>	<i>\$129.00</i>
July											
August											
September											
October											
November											
December											
January											
February											
March											
April											
May											
June											
<b>Total Grain Costs:</b>			<b>Total Hay Costs:</b>			<b>Total Pasture Costs:</b>		<b>Total Other Bedding Costs:</b>		<b>Total Costs:</b>	



## My 4-H Club Activities

As you and your 4-H club participate in club meeting, service projects and fun activities, record the events here. Describe what you did and what knowledge and skills you learned from participating in the activity.

Date of Club Meeting:	Project meetings, fun activities, service projects	Location	What knowledge and skills did you learn?

Choose a few goals for your horse/pony project. Goals should be established at the beginning of your project year. They should be challenging, yet attainable. Goals should include all aspects of your project. At the close of your project, the achievements should be compared with your goals. Write on your own in the space provided. Then, have your leader initial and date the goals you achieve. You should try to complete at least two different goals each year.

Skills I want to learn with my project this year (Goals):	Date Achieved:	Leader's Initial



## Educational Experiences

Please list any seminars, clinics, demonstrations, meeting presentations or educational books that you completed this year. (Examples: Showmanship clinic at MSU; Equine Nutrition Speaker at 4-H group meeting; Vet -A-Visit; Communicating with your horse by John Lyons; Learning to groom video) Attach additional page(s) if necessary!

Date: \_\_\_\_\_ Event/Topic: \_\_\_\_\_

What I learned: \_\_\_\_\_

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Date: \_\_\_\_\_ Event/Topic: \_\_\_\_\_

What I learned: \_\_\_\_\_

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Date: \_\_\_\_\_ Event/Topic: \_\_\_\_\_

What I learned: \_\_\_\_\_

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Date: \_\_\_\_\_ Event/Topic: \_\_\_\_\_

What I learned: \_\_\_\_\_

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*(Please insert the “Educational Page - Ages 16 to 19” here!)*

## **Photographs of My 4-H Horse/Pony Project**





## My 4-H Horse/Pony Project Record Book Score Sheet

4-H Member: \_\_\_\_\_

4-H Club: \_\_\_\_\_

Page #		Possible Points	Your Points
1	<b>Cover Sheet</b>	5	
	All information neat and complete. <i>(Submitted in some type of notebook.)</i>		
2	<b>Signature for Completion plus Leader's Signature</b>	5	
	Page included.		
3	<b>Skill Level</b>	10	
	Leader's signature.		
4-5	<b>Description(s) of Project</b>	10	
	All information is neat and complete. Includes photograph of project animal(s).		
6-7	<b>Health Records</b>	10	
	All information is neat and complete.		
6	<b>Coggins/Vaccinations</b>	10	
	Current copy of Coggins attached – <b>required</b> . Current copy of receipt or veterinary receipt of vaccinations – <b>optional</b> .		
8-9	<b>Feeding and Bedding</b>	10	
	All information is neat and complete. <b>(Judges – page 8 is not required)</b>		
10	<b>Purchases and Gifts</b>	5	
	All information is neat and complete.		
11-12	<b>Club Activities/Goals/Activities Log</b>	10	
	All information is neat and complete.		
13	<b>Educational Experiences</b>	5	
	All information is neat and complete.		
14	<b>Educational Page</b>	10	
	All information is neat and complete.		
15	<b>Photographs</b>	10	
	All photographs are neatly arranged.		
	<b>Total Points</b>	<b>100</b>	
	A: 90 points or above, B: 80 - 89 points, C: 79 points and below		
	<b>Bonus Points - Supplemental (optional)</b>	<b>20</b>	
	<b>Grand Total</b>		