**2023 NATRONA COUNTY 4-H/FFA ALPACA OWNERSHIP I.D. CERTIFICATE**

# THIS FORM DUE BY JUNE 15, 2023

**Member’s Name Common Call Name of Alpaca**

**Mailing Address Registered Name of Alpaca**

**City/State/Zip code Phone # Alpaca's Birthdate (MM/DD/YYYY) Male or Female**

**Owner’s Name Name of 4-H Club/FFA Chapter**

**Breed If registered, name and registration number of: Sire**

**Dam**

**Identification of Animal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* **Brands, color, markings, notches, scars, tattoos, etc. Identify as thoroughly as possible.**

**When was animal acquired for project (MM/DD/YYYY)?**

**When was animal in your possession for project (MM/DD/YYYY)?**

**FILED IN COUNTY OFFICE:**

**Member Signature Date**

**Parent/Guardian Signature FFA Advisor Signature**

## I certify that this is a 4H-FFA project this year and that the above information is correct to the best of my knowledge.