**TAYLOR COUNTY HORSELESS HORSE AGREEMENT FORM** **2023**

This form is for Taylor County Horseless Horse project members.

Date Due: Horseless Horse Agreement forms are due on or before **May 15** in the Extension Office

Return to: 4-H Educator, 925 Donald St., Rm. 103, Medford, WI 54451

Horseless Horse Member Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Horseless Horse Member Address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I understand that as a Horseless Horse member I am expected to work with a Taylor County 4-H Horse Project member or leader to learn about the equine, including grooming, proper equine handling, tack, riding, etc. I understand that I am expected to participate in Taylor County 4-H Horse Project activities and to follow all rules of the project. I will complete the Horseless Horse Member requirements of the project in order to be eligible to exhibit at the Taylor County Fair. This includes using this animal to develop 4-H life skills, to learn about proper equine care and safety and to develop foundational equine handling and riding techniques**.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Horseless Horse Member’s Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Horseless Horse Member’s Parent Name Horseless Horse Member’s Parent/Guardian Signature

The Horseless Horse project member will be partnering with [check the appropriate entry]:

4-H Member \_\_\_\_\_\_\_\_\_\_ 4-H Leader \_\_\_\_\_\_\_\_\_

***I understand that I am expected to work with the Horseless Horse Member to teach them about the horse, including proper equine care and safety and to develop foundational horse handling and riding techniques.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Taylor County 4-H Member/Leader Name Taylor County 4-H Member/Leader Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If 4-H Member, Parent’s Name If 4-H Member, Parent’s Signature

Taylor County 4-H Horse Project Leader Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Horseless Horse Project Member Equine Identification**

Name of Equine: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed of Equine: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This Equine must be registered using the **TAYLOR COUNTY HORSE PROJECT EQUINE REGISTRATION (ID) FORM.**  Equine ID forms are due on or before **May 15** in the Extension Office.