

4-H Horse Replacement Request

In cases of severe illness, injury, or death of the certified primary project horse, a replacement may be considered. Please refer to the San Juan County Horse Replacement Policy and the PNW 4-H Horse Contest Guide.

Please complete the following information and submit to WSU Extension within 48 hours of the veterinary exam. Contact the 4-H Program Coordinator at (360) 370-7662 with any questions.

Name of 4-H Member: _____ Phone: _____
Address: _____
4-H Club: _____

Name of certified primary horse to be replaced: _____
Name of replacement horse: _____ Certified * _____ Non-Certified** _____

*A successful replacement of the certified primary horse may show at the county Fair and State Fair.
**An approved non-certified replacement horse may show at the county level in 4-H Classes and receive Danish ribbons, but is ineligible for Grand or Reserve 4-H rosettes, 4-H Premium points, and 4-H showmanship or 4-H riding awards, and will not be allowed to exhibit at the State 4-H Fair.

Examining veterinarian: _____ Date of Exam: _____
Reason for replacement (Check the appropriate category): Illness: ___ Injury: ___ Death: ___
Attach the letter from the examining veterinarian describing the severe illness, injury or confirming death.

Veterinary Signature: _____ Phone #: _____

Member's Signature: _____

Parent/Guardian Signature: _____

Leader Signature: _____

To be considered for replacement, this form must be submitted to the Extension Office within 48 hours of the date of the veterinary exam. The date of the exam must be stated on the veterinary letter. You may mail, e-mail, fax, or deliver this form and veterinary letter to the 4-H Program Coordinator. If you chose to mail this form and letter, postmark within 48 hours of the examination date.

Attn: 4-H Program Coordinator Date received _____
WSU Extension Office
221 Weber Way Suite LL
Friday Harbor WA 98250
Fax: 378-2187
sanjuan.4-h@wsu.edu

Approved: Yes ___ No: ___ Signature: _____ Date: _____