



CLARK COUNTY



4-H PET PALS PROJECT CERTIFICATE

CLUB NAME

MEMBER'S NAME

ANIMAL SPECIES & GENDER

MEMBER'S AGE & 4-H LEVEL

ANIMAL BIRTH DATE

MEMBERS PHONE

ANIMAL AGE

MEMBERS EMAIL

AFFIX
PHOTOGRAPH
OF
PET

DATE PET WAS ACQUIRE FOR 4-H PROJECT: _____

Member signature

Parent signature

Leader Initials

County WSU 4-H Faculty Date

WSU Extension programs and employment are available to all without discrimination. Evidence of non-compliance may be reported through your local extension office. If special arrangements are needed please contact your local WSU Extension office two weeks in advance of your event (360-397-6060) 4-HAssistant/4-HProjects/PetPals/project certificate 4-2014

WASHINGTON STATE UNIVERSITY

