



2019/2020

Date & Time Received _____
Application Number _____

APPLICATION TO PARTICIPATE OCEANA 4-H MARKET LIVESTOCK PROJECT LITTLE BUDDY LAMB

I wish to participate in the Oceana 4-H Market Livestock Lamb Project.

1. My birthday is: _____, _____ 4-H age: _____
(Month) (Day) (Year) (as of 1/1/2020)
2. I agree to assist in the feeding and care of a lamb for the purpose of participating in the appropriate lamb classes at the Oceana County Fair as a participant in the 4-H Market Livestock Little Buddy Lamb Project.
3. **I understand that all enrollments will be accepted on a first come, first serve basis pending available space. The enrollment time frame for this project is November 9, 2019 from 8:15 a.m. to 8:30 a.m. and will resume during normal business hours (8 a.m.—12 noon & 1:00 p.m.—4:00 p.m.) Tuesday, November 12, 2019 until 4:00 p.m. June 1, 2020. Applications will be Available October 17, 2019 during the Market Livestock Annual Meeting and then at the MSU Extension Office until June 1, 2020. If I choose to be a little buddy participant, I will have to have earned a “B” ribbon or better on my notebook to Be eligible to sell a lamb the following year upon meeting the age requirement.**
I understand that applications received on November 9, 2019 can only be submitted by the 4-Her, parent or sibling. No other relative may submit an application on my behalf. All 4-H Enrollment Forms must be submitted through <https://mi.4HOnline.com> and fees must be paid prior to signing up for the Project. ALL application signatures must be completed for acceptance into the project.
4. My Big Buddy will be _____
(4-H Market Livestock Lamb Project Participant’s Name)
5. This form must be signed by your 4-H Club Leader and parents acknowledging that you are a member of the club and participant in the Little Buddy Program.
6. I have read the above, the project requirements and the code of ethics rules pertaining to the lamb project and agree to abide by them.

Member’s Signature Date

Address _____ Phone Number _____
(Please provide a complete mailing address)

Email _____

I, parent of the above 4-H member, have read the above, the attached project rules/requirements and hereby guarantee performance of the above agreement.

Parent Signature Date

I, the leader of the _____ 4-H Club, agree to supervise and inspect the above member’s project and performance and to report any violations to Oceana Market Livestock Committee immediately.

4-H Club Leader Signature Date

MSU Extension programs are open to all without regard to race, color, national origin, gender, gender identity, religion, age, height, weight, disability, political beliefs, sexual orientation, marital status, family status and veteran status.