

INDIVIDUAL ANIMAL IDENTIFICATION

Twin Falls County 4-H/FFA Cavy Project

(A Copy of this Individual Animal ID must be included in your Cavy Project Record Book)

Date born: _____ Date of Purchase: _____

Club/Chapter: _____

Breed, sex, and Variety:

Seller Name

Address (if available):

Purchase/owners Name

Address:

Seller's Signature

If available

Purchaser's Signature

Revised 7/16