



Ozaukee County 4-H Rabbit Hopping Record Page 20____

Name _____ Grade _____ Years in Project _____

Number of project meetings held _____ Number attended _____

1. List your goal(s) in this project

a. _____

Accomplished Goal: _____ yes _____ no

b. _____

Accomplished Goal: _____ yes _____ no

c. _____

Accomplished Goal: _____ yes _____ no

2. List what you learned and/or accomplished in this project

3. What did you like most about this project?

4. Describe what you would change about this project or what you did in the project.

Rabbit Hopping Project Animals

Rabbit Name		Left Ear Identification	
Breed		Buck or Doe	
Date of Birth		Date of Purchase	

Attach Photo of Animal (with or without you)

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Breed		Buck or Doe	
Date of Birth		Date of Purchase	

Attach Photo of Animal (with or without you)

Rabbit Hopping Practice Records

If you are a Junior member, mark off or color one block per day that you practice. If you are an Intermediate or Senior member, then write the number of minutes (total) that you practiced in a day in the appropriate block. Intermediate/Senior members should add up all of the minutes practiced for each month.

October

(Int.Sr. only) **Total Minutes** _____

November

(Int.Sr. only) **Total Minutes** _____

December

(Int.Sr. only) **Total Minutes** _____

January

(Int.Sr. only) **Total Minutes** _____

February

(Int.Sr. only) **Total Minutes** _____

March

(Int.Sr. only) **Total Minutes** _____

April

(Int.Sr. only) **Total Minutes** _____

May

(Int.Sr. only) **Total Minutes** _____

June

(Int.Sr. only) **Total Minutes** _____

July

(Int.Sr. only) **Total Minutes**_____

August

(Int.Sr. only) **Total Minutes**_____

Rabbit Hopping Events/Exhibits/Demonstrations

Rabbit Hopping Events

Date	Event/Rabbit Name	Location	Placing

Rabbit Hopping Exhibits

Date	Exhibit	Location	Placing

Rabbit Hopping Demonstrations

Date	Topic	Location

Rabbit Hopping Project Expenses

Your expenses should include: Purchase price of project animal (only if purchased this year), harness, 6' lead, travel carrier, travel water bottles and feed dishes, hopping equipment (jumps, green carpet, rails, or materials used to build them), and hopping competition entry fees. Only include expenses you incurred this year.

Date	Item	Cost
Total		

Youth Leader Summary

(Fill out if applicable)

1. Are you a youth leader in the Rabbit Hopping project this year? ____yes ____no
2. How many members did you work with? ____
3. What did you teach?

4. What did you learn as a youth leader?

Rabbit Hopping Project Meetings

Rabbit Hopping Project Meetings

Date	Topic/Activity	What I learned or did?

Member Signature _____ Date _____

Project Leader's Signature _____ Date _____

Comments _____

Parent Signature _____ Date _____

Comments _____

Following the record sheet, add pictures, news articles or materials specifically related to this project to illustrate what you did in this project year.