Llama/Alpaca High Achiever Award Form Year _____

Name: _____ Phone #: _____

4-H Club: _____ 4-H Age (Dec 31st): _____

Age Group: (circle one) Junior (8-10) Intermediate (11-13) Senior (14-18)

Youth Signature: _____ Parent Signature: _____

LLAMA/ALPACA PROJECT FUNCTIONS AND ACTIVITIES

All meeting, practices, clinics and events must be available to all club members. This section to be completed by Project Member and confirmed by Project Leader.

Project Functions	#	Points/Event	Leader Initials	Points Awarded
Llama/Alpaca Project Meetings		2 points ea		
Project Clinics		5 points ea		
Llama/Alpaca Practices		2 points ea		
Project Events		5 points		
		Total Points		

Please date and write a brief description of the meetings, clinics, practices, and events the youth attended throughout the year:

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