

Valencia County

Select Beef Heifer Replacement Project

Parental Support Authorization

I/we, as parent(s) of _____ fully support his/her Application, and have read and agree to the conditions involved. I/we feel that our son/daughter is prepared to properly and safely manage the heifer, and that I/we lend our assurance the necessary resources will be available to provide proper care of the heifer.

Further, we agree to hold harmless New Mexico State University, the Cooperative Extension Service, New Mexico 4-H, New Mexico FFA, and the Producer/Sponsor in the event of injury or loss to our son/daughter or other parties or property by the heifer.

Signature of Parent/Guardian(s)

Signature of Parent/Guardian(s)

To my knowledge, the 4-H or FFA member has sufficient experience and resources to properly and safely manage and care for the heifer.

Signature of 4-H Agent or FFA Advisor

Date

The applicant is an active member in Valencia County 4-H or FFA and is capable of meeting the conditions required for this project.

Signature of County Agent

Signature of Agriculture Advisor

Signature of Parent/Guardian(s)

Signature of Parent/Guardian(s)

Applications will be reviewed and participants will be selected through a scoring of their application by a panel of industry representatives.

Applications must be submitted to the Valencia County Extension Office or mailed to the following address: 404 Courthouse Rd. Los Lunas, NM 87031

****Due October 30th with youth application****