SWINE IDENTIFICATION FORM
Meadowlark Extension District #7
Due Back To Extension Office: May 1st
Please Attach Photos to Back Side

Family Name: ___________________________________________ Phone Number: __________________________________________

Club Name: _____________________________________________ Family Email: ___________________________________________

Date Tagged: ________________ (tag pigs with male end/large number side towards rear of pig) □ PAID
Ear Notch
(if Available)
Right Left

#1
Tag Number: ________________ Name of 4-Her: __________________ Breed: ______________ Description
□ Breeding Gilt □ Market Hog □ Gilt □ Barrow & Markings______________

#2
Tag Number: ________________ Name of 4-Her: __________________ Breed: ______________ Description
□ Breeding Gilt □ Market Hog □ Gilt □ Barrow & Markings______________

#3
Tag Number: ________________ Name of 4-Her: __________________ Breed: ______________ Description
□ Breeding Gilt □ Market Hog □ Gilt □ Barrow & Markings______________

#4
Tag Number: ________________ Name of 4-Her: __________________ Breed: ______________ Description
□ Breeding Gilt □ Market Hog □ Gilt □ Barrow & Markings______________

I certify that the above information is correct: ________________________________ (4-Her Signature)

(OVER to attached a PHOTO of each pig, showing tag)
Please attach the photos to this page with a body shot & head shot with the ear tags showing. The tags need to be readable in the hog’s ear.