2027

FLAGLER COUNTY FAIR & YOUTH SHOW

PEEWEE POULTRY RECORD BOOK

Exhibitor Name _____

Exhibitor Date of Birth ___/___/_____Age as of (9/1/25)_____

Club (circle **one**) 4-H FFA

Score: _____ Place:_____

Hand-written by participant is required.

All pages are formatted to be single-sided for scoring.

Project Agreement

Certification Statements

I hereby certify that as the exhibitor of this project, I have been personally responsible for the care of this animal. I have personally kept records on this project, and I have personally completed this record book.

_____

Exhibitor Signature and Date

I/We, the parent(s)/guardian(s), certify that our son/daughter has completed this project, with our encouragement and assistance, has completed this record book, and will comply with all of the rules and regulations of this show.

_____

Parent/Guardian Signature and Date

Drug Statement

This is to acknowledge that I have been advised that the presence of any drug, antibiotic, or biological residue in my market animal at slaughter will result in the condemnation of the carcass and forfeiture of all sale proceeds and premiums. I hereby certify that any drug, antibiotic, or biological residue which may have been administered by myself, or any person, was done so in strict compliance with the manufacturer's label requirements or as prescribed by a veterinarian.

_____ _____

Exhibitor Signature Parent/Guardian Signature

Pullet Project Animal Inventory

Pullets: List all the birds in your project. (There should be six)

Terms:

Breed- Include any identifying information such as breed, color and size.

Sex- This should be listed as hen or rooster for the pullets.

Date Acquired or Date of Birth- The date you took ownership or the birth date of the animal.

Indicate if kept, Sold or Died- This represents the current status of your stock at the end of your project.

Pullet #	Breed	Sex	Date Acquired/DOB	Kept, Sold or Died
1		M or F	/ /	K, S, D
2		M or F	/ /	K, S, D
3		M or F	/ /	K, S, D
4		M or F	/ /	K, S, D
5		M or F	/ /	K, S, D
6		M or F	/ /	K, S, D

Breed Key:

SW: Silverlaced Wyandotte

BA: Blue Australorp

BO: Buff Orpington

INFORMATION ABOUT YOUR CHICKENS

This page is about all of your chickens (flock).

Breed:_____

Purpose of Breed: Eggs Meat Show

Color of Feathers:_____ Type of Comb_____

Where do you keep your chickens?

_____

Have you collected eggs from your chicken(s)? ____ If so how many per day_____?

Please place a picture of your chickens below. We would love to see all of your flock:

INFORMATION ABOUT YOUR CHICKENS (cont)

How many boys_____ & girls_____?

From the items listed below, which one would you feed your chickens?
Circle only one answer: A. Crumbles B. Bacon C. Steak

How do you clean your chickens?

_____
_____

Name a chicken parasite:

_____
_____

Tell us one interesting fact about your flock:

_____
_____

Please place a picture of your chickens below. We would love to see you with your chickens!

FEEDING YOUR CHICKENS

Chickens need a balanced diet and fresh water daily. It is essential to ensure you are feeding your chickens the recommended amount, as you do not want to overfeed them.

What do you feed your chickens?

_____

_____

How much do you feed your chickens every day?

_____

_____

How much does a bag of chicken food cost? _____

How much does a bag of chicken food weigh?_____

Please place a picture of your chickens below. We would love to see you feeding your flock:

Feed Expenses

Using the examples below, enter your feed data per month in the table. Please add a second page if needed

Month	Pounds of Feed	Description of Starter, Grower & Finisher	Monthly totals
December 2025 EXAMPLE	50 lbs	18% Chick Starter	$18.00
January 2026 EXAMPLE	100 lbs split between sibilings	18% Pullet Grower	$36.00 ÷ 2 = $18.00
November			
December			
January			
Febuary			
March			
April			
Totals:	#		$

Health & Veterinary Records

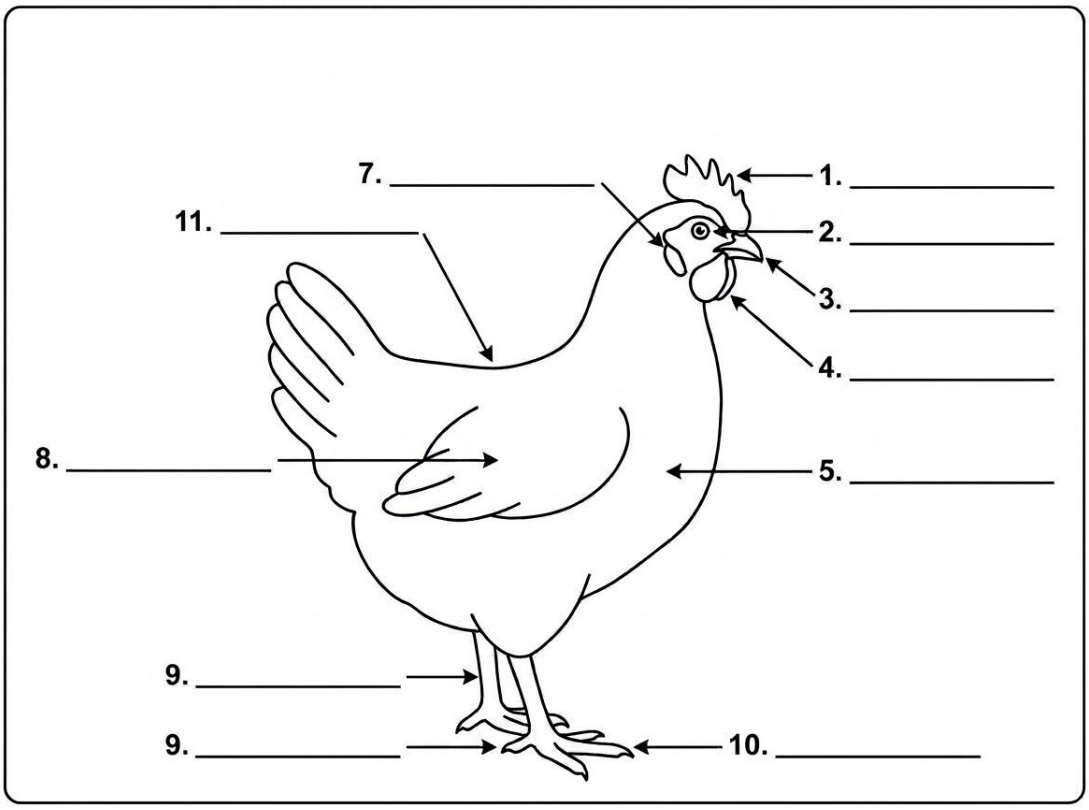
The Health Record includes all health-related activities (vet services, de-worming, medicated feeds with withdrawal times, and vaccinations). You should include the animal treated, what treatment was used, how it was administered, and the purpose of the treatment. If you did none of the above-mentioned, please note accordingly.

Poultry Health Record					
Sex	**Age**	**Illness or Symptoms**	**Treatment**	**Date Treated**	**Successful Treatment (yes/no)**

Poultry Death Record			
Sex	Age at Death	Date of Death	Cause

Part of A Chicken

Color and label the parts of the chicken



Word Bank

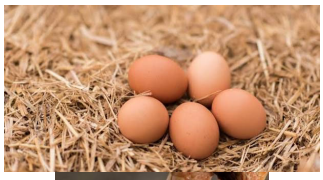
Beak	Eye	Breast	Comb	Earlobe
Toes	Vent	Wattles	Wing	

MATCH THE PICTURE WITH THE WORDS:

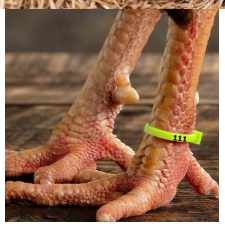
COMB



WING



WATERER



FEEDER



EGG



BAND



Record Book Requirements and Scoring

Please know scoring is subjective due to the nature of this book

Item	Points Possible	Points Earned
Exhibitor Information	5	
Project Page, Certification Statement, Drug Statement	5	
Project Animal Inventory	10	
Information About Your Chickens	20	
Feeding Your Chicken	10	
Feed Expenses	10	
Health & Veterinary Record, Remarks & Incidents	10	
Exhibitor Worksheets	10	
Copy of Buyers Letter	10	
Neatness, Legibility, and Thoroughness (Age-appropriate handwriting) No printing	10	
Total Score	100	/100