## ANIMAL LEASE AGREEMENT

(Due to 4-H Office June 1 of current year)

This animal lease agreement is entered into between the par	ties indicated herein and subject to all the terms and conditions set forth herein:
LESSOR/OWNER:	PHONE NUMBER:
ADDRESS:	
LESSEE:	PHONE NUMBER:
ADDRESS:	
NAME OF ANIMAL:	
TYPE OF ANIMAL: DATE ANIM	MAL BORN: SEX: M or F
BREED:	
REG. NO: T	ATTOO/LD.: Left Ear: Right Ear:
*Please attach a photograph showing a side view of the a	enimai*
this lease.  • The Lessor/Owner represents that the animal is in good.	s the lawful owner of the animal subject to this lease and has the authority to enter into health and good disposition. such discuments that are necessary for signing the animal up for the program or shows
Responsibilities of the Lessee:	
<ul> <li>The responsibility for any medical care or treatment requ</li> <li>This lease represents the entire agreement between the parties.</li> <li>Both parties agree that Comell Cooperative Extension, F</li> </ul>	for the animal in accordance with details to be worked out with the Lesson/Owner. ired by the animal shall be the responsibility of both the Lesson/Owner and Lessee. parties and can only be amended or modified by written agreement signed by both fonda Fair, its officers, directors, employees and volunteers are not parties to this at they have no recourse against any or all of them for any issues whatsoever gardless of the cause of such injury or damage.
This lease is entered into on this day of	
LESSOR/OWNER	LESSEE
Print Name	Print Name
SIGNATURE	SIGNATURE
Please return only this completed form to: Cornel Cooperative Extension of Fulton & Montgomery Court P.O. Box 1500 20 Park St, Room 202	PARENT/GLIARDIAN  Dies  Print Name
Fonda, NY 12068	SIGNATURE
4-H Office Approval	

A Lessor/owner cannot lease to a family member of the same farm operation. The Lessee involved in a family farm cannot lease from another family member from the same farm.

Papalataki agnal