



4-H & FFA Livestock Project Agreement 2024-2025 Show Season

This credit account is for feed, animal health & tack items for 4-H and FFA project animals ONLY. Feed for other livestock, pets, farm hardware, clothing, etc. may not be charged to this account. Failure to comply with this policy may cause termination of this agreement.

Balances on this account will be carried by ACFB/CFS with no interest, until thirty (30) days after the projects are sold. If the accounts are not paid in full within thirty days of sale of animals, a monthly finance charge will be applied to any unpaid balances. Failure to pay off account at the end of the project will prohibit ACFB/CFS from extending agreement to student in the future. This account will be closed at the conclusion of the animal show. A new application must be re-submitted to re-open account for each new show year. Complete form and return to Augusta Cooperative Farm Bureau, Attn: Heidi Diaz.

Section I – To be completed by Student Advisor

This is to certify _____ is deserving of credit consideration in purchasing feed and supplies for a 4-H or FFA project. This consideration is to extend to the market animal show, to be held _____.
(list all show dates for which applicant will be selling his/her projects).

Student Advisor Signature _____ Date _____

Contact Number _____

Section II – To be completed by Sponsor

Sponsors must have an approved credit application on file to be eligible to sponsor this account.

I, _____, as the sponsor of the above student agree to be held liable for the charges made on this account and that the Augusta Cooperative Farm Bureau / Cooperative Financial Solutions will be reimbursed for the charges extended on this account at the conclusion of the project.

Sponsor Signature _____ Date _____

ACFB Account # _____ CFS Account # _____

Contact Number _____

Section III – To be completed by Student

I, _____, am satisfied with the above terms & conditions of this agreement and will be financially responsible for the project. I further agree to carry out good husbandry and management practices of my projects.

Student Signature _____ Grade _____

ACFB Account # _____ CFS Account # _____

Address _____

City, State, & Zip _____

Contact Number _____ Email _____

Please indicate the number of each species on this account:

Steers _____ Sheep _____ Hogs _____ Goats _____

Please complete both sides - Incomplete applications will be returned to applicant



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- 1.) We (Applicant and Parent/Guardian) consent to the disclosure by Augusta Coop Farm Bureau / Cooperative Financial Solutions to the Leader/Advisor/Project Leader, as listed on this project agreement, information regarding my/our 4H/FFA Account, including information regarding payment status. Except for information regarding the 4-H/FFA Account, Augusta Coop Farm Bureau / Cooperative Financial Solutions shall not disclose any credit information regarding the applicant or the Parent/Guardian.

Applicant's Signature

Parent/Guardian

- 2.) I consent to allow Augusta Coop Farm Bureau to use photographs of me and my project animals on Augusta Coop's Facebook page.

Applicant's Signature

Parent/Guardian