Bucket Calf Information Sheet  
Brown County, Kansas

4-Hers Name:________________________________________________

4-H Age:_______

Calf’s Name:________________________________________________

Breed of Calf:______________________________________________

Sex of Calf:   Male_____ Female_____ 

Calf birth Date:_________________ 

When did you start taking care of your calf?__________________________

Beginning weight of the Calf: (app)_______________

Current weight of the calf: (app)_______________

What have you fed your calf? (From beginning until now)
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

How much money do you have invested in your calf at time of the fair?
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

What is your favorite thing about your bucket calf.
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________