



2024 TLBT Gold Merit Project Book

Intermediate, Teen, and Senior Divisions

Name: _____

Address: _____

City, State and Zip Code: _____

Age on January 1, 2025: _____

2024-2025 Grade Level: _____

TLBT Membership Number: _____

Statement of Integrity:

As a member of the TLBT, I personally prepared this record book and certify that it accurately reflects my work.

Signature:



YOUR TEXAS LONGHORN

Registered Name: _____

Date of Birth: _____

How did you acquire your animal? (Home-raised, purchased, donated, etc.)

What plans do you have for your animal's future?

If you could change something about your Texas Longhorn, what would it be?



All registered Texas Longhorns are required to have a holding brand.

Draw a picture of your calf's holding brand below.

Where is this brand located on your animal? _____

Texas Longhorns' horns are measured by Tip-to-Tip, Total horn, and Base.

List your animal's most recent horn measurements:

Date: _____

Tip-to-Tip: _____

Total Horn: _____

Base: _____

Have you ever weighed your animal? _____

If so, what were the weights?

Date: _____

Weight: _____

Date: _____

Weight: _____

Date: _____

Weight: _____

Date: _____

Weight: _____



PICTURES OF YOUR TEXAS LONGHORN

Include both left and right sides



COPY OF TLBAA REGISTRATION CERTIFICATE



ABOUT YOU

How long have you been a TLBT member? _____

How did you get involved in showing Texas Longhorns? _____

Have you held any TLBT offices or served on any TLBT committees? _____

List offices and committee positions held:

How have you helped to promote the TLBT program and/or the Texas Longhorn industry?



List your most meaningful participation in school, church, or community organizations other than the TLBT. Include leadership positions held and any honors received.

How has caring for your animal affected your life?



What would you tell someone who asks you why are you showing a Texas Longhorn?

What have you learned about yourself through this project with your animal?



SHOW RECORD

List shows attended below

Date	Show Name and Location	Entry Fee
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List awards and recognition you have received with your calf.



ANIMAL HUSBANDRY

How many pounds of feed does your animal eat per day? _____

What is the average cost of feed per day for your animal? _____

What kind(s) of hay do you feed? _____

How much hay does your animal consume per day? _____

What is the average cost of hay per month for your animal? _____

Has your animal been seen by a vet? _____

If so, what for? _____

Have you given your animal any vaccinations? _____

If so, list them here: _____



List any other expenses related to caring for your animal that have not been covered.

Date	Equipment Item	Cost
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total other expenses \$ _____

Total Project Expenses \$ _____

