

**Rev 2008** 

Exhibitor's Name

## Nebraska 4-H (revised - Jan. 2008) Certificate of Vaccination for Dogs

Exhibitor's Name		County		
Address(Street or P.O. F	3ox)			
		(City)		(Zip)
Dog's Name		Age	Birth Da	te
Male Female Spa	yed/Neutered B	reed		
Color/Markings				
RABIES VACCINATION VACCINATIONS DO VACCINATIONS WE PLEASE A	NOT NEED TO BI	E GIVEN BY A MEONE OTHE	CERTIFIED VE' R THAN YOUR	TERINARIAN. IF VETERINARIAN.
Vaccinations required for Ne year of the show date.	braska State Fair Dog	g Show: All requ	ired vaccinations	must be given within 1
Vaccination	Date Given	Vaccination	n	Date Given
Rabies		Distemper		
1 year   3 year			• • H5/•/2/95	
Rabies Tag No.		Infectious ca	anine hepatitis	
	1/	Parvovirus		9 <del></del>
If vaccinations other than rab	ies not provided by ve	eterinarian, signa	ture of vaccination	n provider.
Name				
Signature			e	
I hereby verify that I am a lice				
Clinic Name			Phone	
Mailing Address				
City				
Administering Veterinarian's				
eterinarian's Signature Date				



Extension is a Division of the Institute of Agriculture and Natural Resources at the University of Nebraska-Lincoln cooperating with the Counties and the United States Department of Agriculture.