



Rev 2008

Exhibitor's Name

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

County

Address(Street or P.O. Box		(0	ity)	(G.)
			**	(Zip)
Dog's Name		Age	Bir	th Date
Male Female Spaye	ed/Neutered	Breed		***************************************
Color/Markings		T-1		
RABIES VACCINATION MUST BE GIVEN BY A CERTIFIED VETERINARIAN. ALL OTHER VACCINATIONS DO NOT NEED TO BE GIVEN BY A CERTIFIED VETERINARIAN. IF VACCINATIONS WERE GIVEN BY SOMEONE OTHER THAN YOUR VETERINARIAN, PLEASE ATTACH THE LABELS AND SIGN THE FORM BELOW.				
Vaccinations required for Nebryear of the show date.	raska State Fair I	Dog Show: All requi	red vaccina	tions must be given within 1
Vaccination	Date Given	Vaccination	1 .	Date Given
Rabies 1 year ☐ 3 year ☐ Rabies Tag No.		Distemper		
		Infectious ca	itis	
Rabics Tag Ivo.		Parvovirus		·····
If vaccinations other than rabies not provided by veterinarian, signature of vaccination provider.				
Name		MI - Marian		
Signature		Date	e	·
I hereby verify that I am a licensed, accredited veterinarian and have vaccinated the above dog. Clinic Name Phone				
			1 none _	
Mailing Address			· · · · · · · · · · · · · · · · · · ·	
City		State	Zip	
Administering Veterinarian's N	Vame			
Veterinarian'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.