DURHAM KENNEL CLUB TRAINING CLASSES

Health Certificate

Name of Dog _____ Sex _____

Breed _____ Age _____

Name of Owner _____

Address of Owner _____

_____

VACCINATION RECORD WITH DATES OF MOST RECENT INOCULATIONS OR TITERS

Distemper combination due _____ last done _____

Parvo due _____ last done _____

Rabies (if dog is old enough) due _____ last done _____

Other _____

Is this dog currently on heartworm preventative? _____ Which one? _____
(Recommended by DKC but not required for admission to classes)

Veterinarian's Signature _____

Date _____

Please note: Your instructor will date and initial the form and return it to you. You may continue to use the same form for subsequent class sessions as long as your dog is still current on shots or titers.

It is not necessary to use this form. It is offered only as a convenience to your veterinarian.

Bring your health certification with you on the FIRST NIGHT OF CLASS. Do <u>NOT</u> mail it with your application.