



## **NEW HAMPSHIRE 4-H DOG HEALTH FORM**

		FIIOHE	Age (1/1)
Address	City	State	Zip
Email			
Name of dog	Color ar	nd markings	
Dog's Date of birth	Breed:		-
Registered:Yes;No; Sex:	_Male;Female;	Spayed or Neuter	red?YesNo;
	HOME IMMUNI	ZATION DECO	ADD.
If you give your own immunizations gave the vaccine to your dog.  Distemper (DHPP)	, please write in the	serial number from	m vaccine bottles and the date that you
Leptospirosis	Bordet	ella (Kennel Cou	gh)
Administered by			
·	(Signat	ure) (Date)	
The signatures a	bove and below ALI	L must be comple	photocopy of your vaccination record eted prior to exhibition.
DISEASE	DATE VA	CCINATED	DUE DATE OF NEXT VACCINATION
RABIES (Required) □ - 1 yr; □ - 3 yr.			
□ - 1 yr; □ - 3 yr.  DISTEMPER (DHPP) (Required ESE& All About the Dogs Weekend)			
□ - 1 yr; □ - 3 yr.  DISTEMPER (DHPP) (Required ESE& All About the Dogs Weekend) □ - 1 yr; □ - 3 yr.			
□ - 1 yr; □ - 3 yr.  DISTEMPER (DHPP) (Required ESE& All About the Dogs Weekend) □ - 1 yr; □ - 3 yr.  LYME			
□ - 1 yr; □ - 3 yr.  DISTEMPER (DHPP) (Required ESE& All About the Dogs Weekend) □ - 1 yr; □ - 3 yr.  LYME  LEPTOSPOROSIS  BORDETELLA (Kennel Cough)	nunicable disease	will result in t	the dog being sent home.
□ - 1 yr; □ - 3 yr.  DISTEMPER (DHPP) (Required ESE& All About the Dogs Weekend) □ - 1 yr; □ - 3 yr.  LYME  LEPTOSPOROSIS  BORDETELLA (Kennel Cough)		will result in t	the dog being sent home.  Veterinarian's Signature

 $\textit{Visit our website:} \ \underline{\textit{extension.unh.edu}}$ 

City, State, Zip