



Health Certificate

This form must be completed by your veterinarian and returned to Narnia Pet Behavior & Training *on or before* your first scheduled class.

Class location: _____
Class date and time: _____

Health Certificate

(To be completed by your veterinarian)

This is to confirm that _____, owned by _____,
(Pet's Name) (Owner's Name)
is up to date on inoculations, in good health, and free of parasites.

The following inoculations and tests have been given:

(Please check the circle, and fill in the date of the inoculation or test.)

- DHPP** _____ *(Indicate type:)* 12 Month 36 Month
- Rabies** (age appropriate) _____ *(Indicate type:)* 12 Month 36 Month
- Fecal test** (indicate result) _____
- Bordetella*** _____

** Vaccination against Bordetella is mandatory if attending class in Lisle, otherwise it is optional.*

Other comments: _____

Veterinarian's Signature: _____ Date: _____

This form can be faxed to Narnia Pet Behavior & Training at 630.904.7987.