2018	County Dog Project Identification Form and Vaccination Certificate
	Show Date

## **IDENTIFICATION FORM**

(To be completed by Exhibitor)

Exhibitors: Complete this identificate guardians must read the statement at to verify reading the 2018 Project Requirements (and 2018 Ohio Venue Rules, if applicable) and agree 2018 Permission to Participate form on the statement of the s	he bottom of  State Fair D to abide by	f this section and sign County og Show Rules/Show them, and having a	
Exhibitor's Name			
County Enrolled in 4-H	Phone (	)	
Mailing Address			
CityS	tate	Zip	
Dog's Call Name			
Dog's Birth DateMo./Day/Yr.	Age_		
Mo./Day/Yr. Predominant Breed			
Color & Markings			
Sex: [ ] Male [ ] Neutered Male [ ] Female [ ] Spayed Female			
Dog License Tag No	(Mı	ust list tag number)	
Signatures Required: We verify we have Project Requirements, and if showing at the O Dog Show/Show Venue Rules, and agree to ab 2018 Permission to Participate in Ohio 4-H D of Claims form on file in our county Extension terms set forth therein.  Exhibitor's Signature	SF, the 2018 (ide by these rules of Activities Lands of Activities and ag	Ohio State Fair Jr. Fair les. We have a signed Disclosure and Release gree to be bound by the	
Parent/Guardian Signature			
-			
Date Signed	accination at the	Ohio State Fair Dog Show.	

## VACCINATION CERTIFICATE – VETERINARIAN MUST COMPLETE THIS ENTIRE SECTION!!

Exhibitors: Take this form to your veterinarian! This Vaccination Certificate MUST be completed and signed by a licensed veterinarian. All dogs MUST have current rabies vaccinations. Your veterinarian must document on this form that your dog's Rabies vaccination is current by filling in the "Date Expires" blank. Additionally, the Ohio 4-H Dog Program requires all dogs be vaccinated yearly for Distemper, Hepatitis, Leptospirosis, Parainfluenza, and Parvovirus for exhibition at the Ohio State Fair Dog Show, unless otherwise noted below by veterinarian. Bordetella vaccination is recommended, but not required. Veterinarian protocol for vaccinations will be followed. All vaccinations must be administered by a licensed veterinarian. For the Ohio State Fair Dog Show, all vaccinations must be current through August 2, 2018. **Rabies** Date Given Date Expires Product Serial # DHLPP Date Given Date Expires Product Serial # With the exception of Rabies, specific vaccination requirements may be waived if the veterinarian initials the applicable box below. Does not give Leptospirosis vac. [ ] Other, please list or attach documentation Does not give yearly core vac. [ ] Titer Testing (attach proof) Clinic Information Clinic Name

## Mailing Address City\_\_\_\_\_ State\_\_\_ Zip\_\_\_\_ Administering Veterinarian's Name Veterinarian's Signature Date Clinic Phone ( )