2026_____ COUNTY COMPANION ANIMAL DAY CERTIFICATE OF VACCINATION for CATS and FERRETS

Exhibitor's Name _____ County _____

Address _____
(Street or P. O. Box) (City) (Zip)

Pet's Name _____ Age _____ Birth Date _____
(Month/Day/Year)

Male [ ] Female [ ] Spayed/Neutered [ ] Species/Breed _____

Color/Markings _____

THE INFORMATION BELOW IS TO BE COMPLETED & SIGNED BY YOUR VETERINARIAN.

VACCINATIONS REQUIRED* FOR _____ COUNTY COMPANION ANIMAL DAY JUDGING for CATS and FERRETS: All required vaccinations must be given by a licensed veterinarian and must be current through _____ _____ for county judging. *Cats must be 15 weeks old and ferrets must be 12 weeks old by day of show.*

Feline Vaccinations	**Date Vaccination Given**
Rabies – 1 year or 3 yrs. (circle one)	_____
Must list Rabies Tag No.	_____
Panleukopenia (FPL)	_____
Viral Rhinotracheitis (PVR)	_____
Calcivirus (FCV)	_____
Feline Leukemia (FeLV) - recommended	_____

Ferret Vaccinations	**Date Vaccination Given**
Rabies – 1 yr. or 3 yrs. (circle one)	_____
Must List Rabies Tag No.	_____
Canine Distemper (CDV)	_____

*With the exception of Rabies, the above vaccination requirements may be waived depending on the veterinarian's recommendations for this individual animal. If a vaccination is waived, please state the reason in the area below. *FeLV is recommended, not required.*

I hereby verify that I am a licensed veterinarian and have vaccinated the above cat or ferret.

Clinic Name_____ Clinic Phone (_____)_____

Mailing Address_____

City_____ State_____ Zip_____

Administering Veterinarian's Name_____

Veterinarian's Signature_____ Date_____

Note: This is for county use only. Lives animals are not permitted at Ohio State Fair Companion Animal Day.