The State of Kansas Companion Animal Health Certificate is applicable in lieu of the Form.

Parent/Guardian Signature ____________________________

4-H Member Signature ____________________________

We certify that the above information is accurate and complete:

Signature of Veterinarian who administered the vaccine

Flea control used:

Lyme Disease Vaccination

Leukemia Tested

Panleukopenia

Cailll

Parvovirus

Rabies Vaccination

Expitation Date

Vaccinations (Required)

Color/Markings:

Predominant Breed:

State M (male) or F (female)

County

4-H Member's Name:

Morris County 4-H Cat Show Immunitation Record