



Family Pet Consultants
200 Republic Avenue, Unit C
Joliet, IL 60435
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Certificate of Health Form

This is to confirm that (pet's name) _____, owned by _____, is up to date on inoculations, in good health, and free of parasites. The following inoculations and tests have been given: (check line and fill in date on line)

- ___ DHLPPC _____
- ___ Rabies _____ (over 4 months of age)
- ___ Bordetella _____
- ___ Fecal Test Negative _____

Class Date and time: _____

Other Comments: _____

Veterinarian's signature _____ Date _____