



AKC S.T.A.R. PUPPY PRESCHOOL



Socialization • Training • Activity • Responsibility

Health Certificate

**Please have the following form completed by your veterinarian and return it first day of class,
the Puppy Preschool Agreement and Puppy Information form**

Owner's Name:	
Pet's Name:	
Hospital Name:	
Hospital Phone Number:	

The following vaccines were given on:

Distemper:	
Parvo:	
Bordetella:	
Fecal Test:	Results:
Other:	

Veterinarian Signature:	
Date:	