

(Veterinarian letterhead must be copied above)

Puppy's Name \_\_\_\_\_

Owner's Names \_\_\_\_\_  
(first and last names)

I have examined the above named puppy on \_\_\_\_\_(date) and judged him/her to be in good health. I am aware that above stated puppy will be attending Dog Gone Good's Puppy Class. At this time, above stated puppy does not have any apparent signs of contagious illnesses.

The most recent distemper combination vaccine was given on \_\_\_\_\_(date)

The most recent bordatella vaccine was given on \_\_\_\_\_(date). The type of vaccine was \_\_\_\_\_(please state whether it was intranasal or injectable).

Dog Gone Good prefers the intranasal bordatella because to our knowledge, it has a more rapid onset of immunity than the injectable vaccine. However, if above named puppy's veterinarian feels the injectable is sufficient and the above named puppy is protected for class then we will accept puppies with the injectable bordatella vaccine. If it is a series of 2, then the second is required for class. Veterinarian signature below confirms Dog Gone Good's stated bordatella vaccination requirements are met.

A fecal floatation screen for internal parasites was performed on \_\_\_\_\_(date) and the results were\_\_\_\_\_. Veterinarian signature below confirms that if the results were positive, that the above stated puppy is currently being treated and there is minimal chance of passing parasites to other puppies unless they come in direct contact with his/her stool.

\_\_\_\_\_  
Vet's Signature  
Date \_\_\_\_\_

\_\_\_\_\_  
Printed Name