



2009 Certificate of Completion of Indiana 4-H Program Requirements for Exhibition of Cats



(These vaccinations are required at all 4-H cat shows)

(To be completed by veterinarian whose signature appears below.)

4-H'ers Name _____ County _____

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

Grade in School _____
(as of January 1, 2009)

Cat will be examined by a veterinarian at time of exhibition; any sign of a communicable disease will result in cat being sent home.

REQUIRED:	Date
Rabies vaccination	_____
Panleukopenia vaccination	_____
Rhinotracheitis vaccination	_____
Calicivirus vaccination	_____
Feline leukemia (Negative test within 180 days of show or vaccination within 1 year of show.)	_____

Vaccinations must be given at least 2 weeks prior to, and within 1 year of show date.

Call the State 4-H Office at (765) 494-8433 with questions about exhibition requirements.

Name of cat _____

Color and markings _____

Vaccination tag number _____

Breed _____

Sex: Male Castrated Female OVH (Spay)

Date of birth _____ Weight _____

Recommended Procedures	Date
Fecal parasite exam	_____
Heartworm consultation	_____
Feline Immunodeficiency Virus test	_____

I hereby certify that the cat described on this form has been vaccinated by a licensed/accredited veterinarian.

Date Signature of **4-H member** **Veterinarian's signature**

Date Signature of **4-H parent** verifies the above is complete and accurate Address

Date Signature of **Extension Educator** verifies county 4-H Cat Membership City State Zip

Date Phone () _____

This 4-H cat should be shown at the following class(es):

List: _____

Signature of **4-H Cat Project Leader**

Phone () _____ Date

This original form **must** be brought by the 4-H member to all 4-H cat shows.
For disability needs, please notify the Extension educator whose name appears on this form.