

Greyhound Vaccination Certificate (GAP VIC Pre-Entry)



Person presenting:			
Greyhound name:			
Ear brand:		Sex: (circle)	Male Female <input type="checkbox"/> Desexed
Colour:		Age/DOB:	
Microchip number:	956 _ _ _ _ _		
I, a registered veterinarian, certify that the greyhound identified above, has been vaccinated in accordance with the details below:			
C3: Parvovirus, Distemper and Hepatitis Vaccination date: ___ / ___ / 20 ___ C3 must be administered between 10 days and 2½ years prior to pre-entry		Kennel Cough: Bordetella (MUST BE intra-nasal or oral) plus Parainfluenza* Vaccination date: ___ / ___ / 20 ___ Both must be administered between 10 days and 6 months prior to pre-entry	
<small>* The intra-nasal vaccine contains both Bordetella and Parainfluenza. The oral vaccine contains only Bordetella, so if using oral vaccine, Parainfluenza will need to be given by separate injection (on its own or as part of a C4).</small>			
<h2>VACCINATION STICKER(S) OR VACCINE DETAILS</h2> <p><i>Note to be eligible for GAP VIC pre-entry:</i></p> <p>(1) vaccines must be administered within above timeframes</p> <p>(2) Bordetella vaccine must be intra-nasal or oral</p>			
Veterinary clinic details:			
Date of certification:	___ / ___ / 20 ___	Veterinarian signature: Veterinarian name: Veterinary Board reg #:	
Next vaccination due:	___ / ___ / 20 ___ Type:		

Please email to gapbooking@grv.org.au