



Green County Fair

Dog Health Form - Due: **May 22, 2025**

Exhibitor Information:

Name: _____ Grade: _____

Address: _____
Street City State Zip Code

Parent(s) Name: _____

Phone: _____ Email: _____

Youth Organization: 4-H FFA Other: _____

Club/Chapter Name: _____

Dog Owner Information: (if applicable)

Name: _____ Phone: _____

Address: _____
Street City State Zip Code

Email Address: _____

Is there an agreement in place between Exhibitor & Owner? Yes No

Dog Information:

Name: _____ Breed: _____

Date of Birth: _____ Sex: Male Female
 Neutered/Spayed Intact

Veterinarian Examination Requirements:

These are the veterinary medical record requirements to exhibit at the Green County Fair Dog Show. Please provide a copy of your Veterinary Record for the above dog that includes:

- | | |
|--|--|
| <input type="checkbox"/> Rabies | <input type="checkbox"/> Fecal Exam – not to be done less than 30 days of this form being due. |
| <input type="checkbox"/> Distemper | <input type="checkbox"/> External Parasites exam |
| <input type="checkbox"/> Parvo | <input type="checkbox"/> General health status statement from Veterinarian |
| <input type="checkbox"/> Bordetella (Kennel Cough) | |
| <input type="checkbox"/> Lepto | |
| <input type="checkbox"/> 4DX test (Heartworm, 3 tick borne diseases) | |

***Veterinary record needs to be from the Vet Clinic with on their letterhead, with a Vet Signature applied.

Agreement:

The exhibitor, parent(s), and/or dog owner(s) have provided up-to-date and accurate information on themselves and the dog being exhibited at the Green County Fair. The exhibitor, parent(s), and/or dog owner(s) has submitted accurate veterinary records for the dog being exhibited at the Green County Fair.

Exhibitor Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Dog Owner (if applicable) Signature: _____ Date: _____