

Rhino & Flu Shots **MUST BE** Given **BEFORE JUNE 1ST** OF THE CURRENT YEAR \

TURN THIS SHOT RECORD IN AT THE JUNE HORSE ADVISOR MEETING

A PROOF OF PURCHASE NEEDS TO BE STAPLED TO FORM
ALL FORMS NEED TO HAVE A PICTURE OF THE LEFT, RIGHT AND FRONT
VIEW OF YOUR HORSE STAPLED TO THIS FORM

Name: _____ #of Years in 4-H: _____

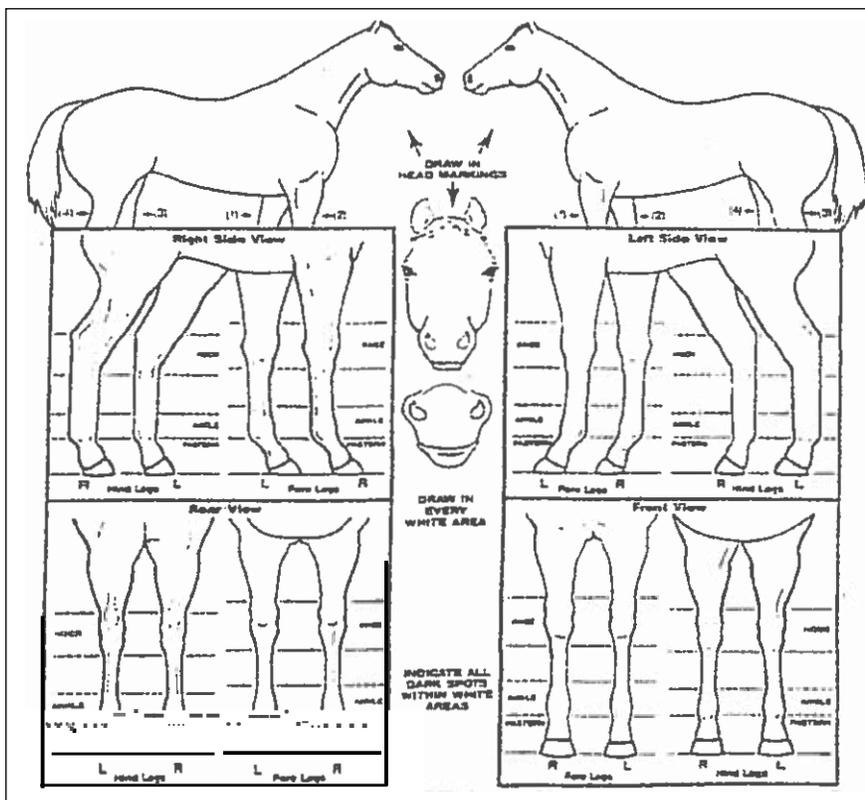
Address: _____ Phone #: _____

Club Name: _____ Advisor Name: _____

Horse/Pony's Name: _____ Breed: _____

Color: _____ Sex: _____ Age: _____ Height: _____

Special Markings: _____



VETERINARIAN:

It is imperative that you sign and date this form when you give the rhino and flu shot. The 4-H members should have this completed before you sign. Please sign in **INK** only

Veterinarian or Advisor Signature: _____

Date of Rhino & Flu Shot: _____