Attica Independent Fair

Feeder Vaccination Form

 $\mathbf{*1}^{st}$ dose on or around June $\mathbf{1}^{st}$. $\mathbf{2}^{nd}$ dose on or around July $\mathbf{1}^{st}$. $\mathbf{*}$

Exhibitor Name:		
Club:		
All calves must receive TWO of IBR, P13, BVD, BRSV • Pasteurella	doses of the following vaccines:	
**One series of vaccina	itions must be completed l	oy a licensed Veterinarian.
Date of 1 st Dose:	Vaccine Used:	
Date of 2 nd Dose:	Vaccine Used:	
Veterinarian Signature:		
Print Name:		
Signature:		
Person Administering Vaccines:		TAG#
Print Name:		(To be filled in at weigh-in.)
Signature:		
(Revised 1/2019)		