



South Dakota 4-H Dog Project ID Affidavit & Vaccination Verification

Deadline: July 1



SOUTH DAKOTA STATE UNIVERSITY EXTENSION

This form must be uploaded to 4HOnline before attending project meeting or by July 1.

Dog Identification

County: _____

4-H Youth ID # _____

4-H Youth Name _____

Dog's Call Name _____

Dog's Birth Date _____ Age _____
Mo/Day/Yr

Predominant Breed _____

Sex: Male Neutered Male
 Female Spayed Female

Height of dog in inches _____

This dog is leased to the 4-H member, and owner certifies member has permission to train dog identified on this form.

Signature of Owner

Photo of Dog

(paste digitally or attach and scan document for 4HOnline)

Vaccination Certificate

Members: Take this form to your veterinarian. This Vaccination Certificate must be completed and signed by a licensed, accredited veterinarian. All dogs MUST have current rabies vaccinations. Your veterinarian must document on this form whether your dog's Rabies vaccination is current for 1 year, 2 years, or 3 years by filling in the "Date Expires" blank.

Additionally, a current Distemper, Hepatitis, Leptospirosis, Parainfluenza, and Parvovirus (DHLPP) is required for 4-H dogs, unless otherwise noted, either by titer or dog is unfit for vaccination, below by veterinarian. In case of vaccination being waived by a veterinarian or a titer, proof must be included with this form.

Rabies: Product _____
Date Given _____ Date Expires _____ Serial # _____

DHLPP: Product _____
Date Given _____ Date Expires _____ Serial # _____

With the exception of Rabies, specific vaccination requirements may be waived if the veterinarian initials the applicable box below.

Does not give Leptospirosis vac. Other, please list _____
 Follows AAHA recommendations

Clinic Information

Clinic Name _____ Clinic Phone (_____) _____

Mailing Address _____

City _____ State _____ Zip _____

Administering Veterinarian's Name _____

Veterinarian's Signature _____ Date _____

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