Pet Name:

Date of birth: ± 2022

MALE X FEMALE X DOG CAT

Colour: White & Tan

Breed: Wirehaired Terrier

Distinguishing features:

Microchip number:

Microchip implant date: REGISTERED

Name of owner:

Contact number:

Physical address:

STERILISATION CERTIFICATE

This is to certify that the animal above

Was sterilised on: __________

By Dr: __________

Vet Signature: __________

Date:	Vaccine name and batch number:	Signature of veterinarian:	Next vaccination:	Date:	Vaccine name and batch number:	Signature of veterinarian:	Next vaccination:
10/03/2026	Nobivac® 1-DAPPv 02121611A 09-SEP-2026	[signature]	9/04/2026				