

Pet Name: _____

Date of birth: ± 02/2026

MALE ☐ FEMALE ☒ DOG ☒ CAT ☐

Colour: Black

Breed: Pitbull x

Distinguishing features: _____

Microchip number: _____

Microchip implant date: _____

Name of owner: _____

Contact number: _____

Physical address: _____

REGISTERED

STERILISATION CERTIFICATE

This is to certify that the animal above

Was sterilised on: _____

By Dr: _____

Vet Signature: _____

Date: 02/04/2026

Vaccine name and batch number: _____

Signature of veterinarian: _____

Next vaccination: 01/05/2026

Date: _____

Vaccine name and batch number: _____

Signature of veterinarian: _____

Next vaccination: _____

0212B11A
DP-SEP-2026

01/05/2026