

GREYHOUND VACCINATION CERTIFICATE



Owner/Trainer name			
Greyhound name			
Ear brand		Sex: (circle)	Male Female
Colour		Whelp date	
Microchip number			

I, as a registered veterinarian, certify that upon consideration of the full vaccination history of the greyhound identified above, **the greyhound is vaccinated to a C5 level and will remain current for 12 months from the date of the vaccination below.**

Insert vaccination stickers here

Veterinary clinic details		
Date of vaccination __ / __ / __	Vet signature	
	Vet name	
	Vet board reg #	

Please submit this completed form to GWIC by either:

- **Email** - registration@gwic.nsw.gov.au
- **Post** - PO Box 718, Bathurst NSW 2795
- **In person** - Level 1, 230 Howick Street, Bathurst NSW 2795

If assistance is required with your application, please contact our Registration and Welfare Team on 13 49 42 or email registration@gwic.nsw.gov.au.