Veterinary health certificate

Breeder of the Cat :

_____ _____ _____
Name **Street** **Town**

_____ _____ _____
Country **Phone** **Email**

Description of the Cat :

_____ _____
Name of Cat **Rasse / Breed**

_____ _____ _____
Color **Gender** **Date of Birth**

General Health Certification :

This is to certify that the above cat was examined by me on the _____ day of this certificate. The cat has shown no signs of a disease communicable to humans or other animals. There was also no suspicion of a communicable disease.

On the date of issue of this certificate of health I examined the cat described above and found no signs or symptoms of contagious disease.

Other remarks	*yes*	*no*
Are the Feet ok (correct number of Toes)?	◯	◯
Is the Tail ok (no Tail faults)?	◯	◯
Is the Thorax ok (no signs for Pectus)?	◯	◯
Are the Teeth ok?	◯	◯
Are the Joints ok?	◯	◯
Are the Eyes ok?	◯	◯
Is the Heart ok?	◯	◯
Is the Navel ok?	◯	◯
<u>For high white Cats:</u> Is the Cat able to hear?	◯	◯
<u>Males</u>: Are both testicles there?	◯	◯
Is anything else wrong?	◯	◯

If yes, what's wrong? _____

_____

Other Remarks : _____

_____

_____ _____
Date Signature of the Veterinarian