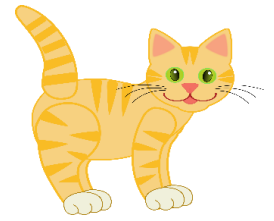




# Pet Vaccination Clinic



Saturday May 18, 2024

9:00 AM to 1:00 PM

Lehigh Township Municipal Building  
1069 Municipal Road  
Walnutport, Pa.

**Dog & Cat Rabies Shots \$30**

**Dog & Cat Distemper Shots \$35**

No appointment necessary. Cash or check only.

Please complete the registration form below. Preregistration encouraged by dropping form at Municipal Building.

Owner's Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_

Pet Information: (Please complete a separate form for each pet)

Dog or Cat (Circle one) Pet's Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_

Pet's Age: \_\_\_\_\_ Approximate Weight: \_\_\_\_\_ Sex: \_\_\_\_\_ Spayed or Neutered (Circle one)

Last Vaccination Date (if known)

Vaccine Requested: Rabies \_\_\_\_\_ Distemper \_\_\_\_\_ Both \_\_\_\_\_

I acknowledge that this is a vaccination clinic. My pet(s) are not receiving a physical exam and I am taking full responsibility that they are healthy and am responsible for any medical expenses outside of this vaccination clinic. My signature releases Dr. Benjamin Shelly, Blue Ridge Veterinary Clinic, and Lehigh Township from any and all responsibility.

Signed: \_\_\_\_\_

**\*\*Dogs must be leashed. Cats must be crated.\*\***