

CERTIFICATE OF FITNESS

**** Note – This examination must be performed prior to mating the bitch ****

Registration Number: _____

Name: _____

Breed: _____

Colour: _____

I hereby certify that I examined the above dog on ____ / ____ / 20____ (date) and found her to be in good health at the time of this consultation. I find no reason to exclude her from having another litter within the next six (6) months.

Section 2 – Code of Ethics and Undertaking

2.d.iii I shall not breed any bitch kept or owned by me causing it to whelp more than four (4) times without prior veterinary certification of fitness for further breeding. This certification must be forwarded to the CCC (Q) t/as Dogs Queensland.

Veterinary Surgeon: _____

Surgery: _____

Signature: _____ Date: ____ / ____ / 20____