Vaccination Questionnaire

Owner Name: ____________________________________________

☐ Dog  ☐ Cat  Name: ____________________________________________

Date: ____________________________

Is your pet current on its vaccines?  ☐ Yes  ☐ No

Has your pet had a bordetella vaccine in the past 6 months?  ☐ Yes  ☐ No

This hospital treats many patients that are ill. Please be aware that if your pet’s bordetella vaccination is not current, he/she may be at risk of contracting kennel cough. Even being vaccinated unfortunately does not protect your pet from every strain of bordetella that could be contracted; so on occasion a vaccinated animal can develop kennel cough.

We work hard to sterilize and disinfect all of our spaces and equipment; however kennel cough spreads through the air. With the added factor of ill pets having decreased immune systems, we want you to be aware of the risks associated with kennel cough.

________________________________________
Owner Signature