



A Family Event and Benefit For The



PO Box 4134  
Steamboat Springs, Colorado 80477  
(970) 879-4370  
www.communityagalliance.org

Saturday, June 21, 2008

## EQUINE CERTIFICATE OF HEALTH

I have examined \_\_\_\_\_,  
(Horse Name)

Belonging to \_\_\_\_\_,  
(Owners Name)

on this \_\_\_\_\_ day of \_\_\_\_\_, 2008.

I have found no evidence of contagious communicable diseases.

\_\_\_\_\_  
Veterinarian's Signature

Contact Information for Veterinary Questions or Concerns:  
(Business Card May Be Attached)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**THIS CERTIFICATE IS VALID FOR 30 DAYS**

