

Rabies Vaccination Clinic Scheduling Form
Mississippi Board of Animal Health

At least two weeks before scheduling a rabies clinic, send this form to Dr. Brigid Elchos at Brigid@mdac.ms.gov or 601-359-1177.

Date of Rabies Clinic: _____

Location of Rabies Clinic (include address): _____

Name and Contact Information for Veterinarian Holding the Clinic: _____

Number of Doses of Rabies Vaccine Needed for Clinic: _____

Number of Syringes Needed: _____

Number of Certificates Needed: _____

Address to Send the Supplies: _____

Comments: _____

Upon completion of the Rabies Clinic see the “Rabies Clinic Follow-up Instructions” to return any unused supplies and the fees collected to support the clinics.

If you have any questions please email or call (601-953-3800) Dr. Brigid Elchos. Have a great clinic and thank you for your participation!