



Cattle Owner

Ranch name _____
Owner/manager _____
Zoetis Customer NARC ID (If Available) _____
Address _____
City _____ State _____ ZIP _____
Phone¹ _____
Email¹ _____

Enrollment and marketing information

Total number of head enrolling: Bulls/Steers _____ Heifers _____
Date of first calf born (mm/dd/yyyy) _____
Weaning date (mm/dd/yyyy) _____
Planned marketing/delivery date (mm/dd/yyyy) _____
(Enrollment information must be received at least two weeks prior to the marketing date in order to guarantee SelectVAC cards will arrive before cattle are marketed.)
Approximate sale weight _____ lb. to _____ lb.
Check marketing choice: Livestock auction market Video auction
 Private treaty Other market name _____
Livestock auction market name, city and state _____

Administration information

Label directions should be followed when administering product. Please contact your veterinarian should questions arise about product usage or administration. Write date of administration for each product used in appropriate area (mm/dd/yyyy).

Product Administered	First Administration	Second Administration
BOVI-SHIELD GOLD ONE SHOT®		
CATTLEMASTER GOLD FP® 5		
PROTIVITY™		
INFORCE™ 3		
BOVI-SHIELD GOLD® 5		
ONE SHOT®		
ONE SHOT® BVD		
ONE SHOT ULTRA®		
ULTRABAC®		
ULTRACHOICE®		
VALBAZEN®		
DECTOMAX®		
VALCOR® (doramectin and levamisole injection)		
SYNOVEX® C		

Affidavit: I certify that the calves listed meet or will meet SelectVAC requirements and products have been or will be administered according to label directions and BQA guidelines. Proof of purchase required for enrollment. I also certify that the information on this form is true and accurate.

Signature of enroller required.

Signature _____
Date _____

Please choose the location where you would like the SelectVAC® cards sent:

Ranch/operation SelectVAC specialist Veterinarian/herd health adviser
SelectVAC specialist or Veterinarian/herd health adviser _____
Business/clinic name _____
Address _____
City _____ State _____ ZIP _____
Phone¹ _____
Email¹ _____

¹By providing your email address, you are agreeing to receive email communications from Zoetis. We promise to never sell your email address to a third party. Visit zoetis.com/privacy-policy for Zoetis Privacy Policy.

Select appropriate designation based on the requirements listed on the back of this form:

- PreVAC™
- PreVAC+™
- WeanVAC™
- StockerVAC™

Other information

Early in life vaccinations or additional products administered _____

Additional Comments:

Please return documentation and completed form to:

Zoetis SelectVAC Program
P.O. Box 815396
Dallas, TX 75381
Fax: 888-390-0043

Or go to www.selectvac.com to enroll online.
Questions? Call 866-267-0405.



For calves processed once at the herd of origin, two to six weeks prior to shipment.

PreVAC requirements, two to six weeks prior to shipment:

- 7- or 8-way clostridial/blackleg vaccine
- IBR-BVD-PI₃-BRV viral vaccine
- *Mannheimia haemolytica* bacterin

Product options that meet PreVAC requirements:

- BOVI-SHIELD GOLD 5*
- ONE SHOT ULTRA 7 or ONE SHOT ULTRA 8*
- or
- BOVI-SHIELD GOLD ONE SHOT*
- ULTRACHOICE® or ULTRABAC*
- or
- INFORCE 3*
- ONE SHOT BVD*
- ULTRACHOICE 7 or ULTRACHOICE 8
- or
- CATTLEMASTER GOLD 5*
- ONE SHOT ULTRA 7 or ONE SHOT ULTRA 8

Other PreVAC recommended practices:

- Vaccinate with PROTIVITY™
- Parasite control with DECTOMAX®, VALCOR®, or VALBAZEN®
- Implant with SYNNOVEX® C, SYNNOVEX PRIMER, or SYNNOVEX CHOICE

For calves processed twice at the herd of origin, with the last process to include all products.

STEP 1: PreVAC+ requirements, first processing

- 5-way (IBR-BVD-PI₃-BRV) viral vaccine
- 7- or 8-way clostridial/blackleg vaccine
- *Mannheimia haemolytica* bacterin** (Single administration required, now or two to six weeks prior to shipment)
- Parasite control (single administration required, now or at or near weaning)

• Revaccinate with 5-way (IBR-BVD-PI₃-BRV) viral vaccine (second administration is required)

STEP 2: PreVAC+ requirements, second processing two to six weeks prior to shipment

- 7- or 8-way clostridial/blackleg vaccine
- *Mannheimia haemolytica* bacterin (single administration required; must administer now if administered greater than six weeks earlier)

Product options that meet PreVAC+ requirements:

- BOVI-SHIELD GOLD 5
- ONE SHOT ULTRA 7 or ONE SHOT ULTRA 8
- or
- BOVI-SHIELD GOLD ONE SHOT
- ULTRACHOICE or ULTRABAC
- or
- INFORCE 3
- ONE SHOT BVD
- ULTRACHOICE 7 or ULTRACHOICE 8
- or
- CATTLEMASTER GOLD 5
- ONE SHOT ULTRA 7 or ONE SHOT ULTRA 8

Other PreVAC+ recommended practices:

- Parasite control with DECTOMAX, VALCOR, or VALBAZEN
- Implant with SYNNOVEX C, SYNNOVEX S, SYNNOVEX PRIMER, SYNNOVEX CHOICE, or SYNNOVEX H

For calves processed twice at the herd of origin, with the last processing at or near weaning. Standard management practices suggest the first and second processing should be within an eight-week interval. Calves must be held at the herd of origin for at least 45 days post-weaning.

STEP 1: WeanVAC requirements, first processing 6 to 8 weeks prior to weaning.

- 5-way (IBR-BVD-PI₃-BRV) viral vaccine
- 7- or 8-way clostridial/blackleg vaccine
- *Mannheimia haemolytica* bacterin (single administration required, now or two to six weeks prior to shipment)
- Parasite control (single administration required, now or at or near weaning)

• Revaccinate with 5-way (IBR-BVD-PI₃-BRV) viral vaccine (second administration is required)

STEP 2: WeanVAC requirements, second processing at or near weaning (calves must be held at the herd of origin for at least 45 days post-weaning)

- 7- or 8-way clostridial/blackleg vaccine
- *Mannheimia haemolytica* bacterin (single administration required; must administer now if administered greater than six weeks earlier)
- Parasite control (single administration required; must administer now if not done during first processing)

Product options that meet WeanVAC requirements:

- BOVI-SHIELD GOLD 5
- ONE SHOT ULTRA 7 or ONE SHOT ULTRA 8
- DECTOMAX or VALBAZEN
- or
- BOVI-SHIELD GOLD ONE SHOT
- ULTRACHOICE or ULTRABAC
- DECTOMAX or VALBAZEN
- or
- INFORCE 3
- ONE SHOT BVD
- ULTRACHOICE 7 or ULTRACHOICE 8
- DECTOMAX or VALBAZEN
- or
- CATTLEMASTER GOLD 5
- ONE SHOT ULTRA 7 or ONE SHOT ULTRA 8
- DECTOMAX, VALCOR, or VALBAZEN

Other WeanVAC recommended practices:

- Implant with SYNNOVEX C, SYNNOVEX S, SYNNOVEX H, SYNNOVEX ONE GROWER, SYNNOVEX CHOICE, or SYNNOVEX PRIMER

For purchased calves processed twice, with the last processing at least 14 days prior to shipment. Standard management practices suggest the first and second processing should be within an eight-week interval. Calves must be held for at least 60 days.

STEP 1: StockerVAC requirements, first processing

- 5-way (IBR-BVD-PI₃-BRV) viral vaccine
- 7- or 8-way clostridial/blackleg vaccine
- *Mannheimia haemolytica* bacterin (single administration required, now or at least 14 days prior to shipment)
- Parasite control* (single administration required, now or at least 14 days prior to shipment)

• Revaccinate with 5-way (IBR-BVD-PI₃-BRV) viral vaccine (second administration is required)

STEP 2: StockerVAC requirements, second processing at least 14 days prior to shipment (calves must be held at least 60 days)

- 7- or 8-way clostridial/blackleg vaccine
- *Mannheimia haemolytica* bacterin (single administration required; must administer now if not done during first processing)
- Parasite control (single administration required; must administer now if not done during first processing)

Product options that meet StockerVAC requirements:

- BOVI-SHIELD GOLD 5
- ONE SHOT ULTRA 7 or ONE SHOT ULTRA 8
- DECTOMAX or VALBAZEN
- or
- BOVI-SHIELD GOLD ONE SHOT
- ULTRACHOICE or ULTRABAC
- DECTOMAX or VALBAZEN
- or
- INFORCE 3
- ONE SHOT BVD
- ULTRACHOICE 7 or ULTRACHOICE 8
- DECTOMAX or VALBAZEN
- or
- CATTLEMASTER GOLD 5
- ONE SHOT ULTRA 7 or ONE SHOT ULTRA 8
- DECTOMAX, VALCOR, or VALBAZEN

Other StockerVAC recommended practices:

- Implant with SYNNOVEX C, SYNNOVEX S, SYNNOVEX H, SYNNOVEX PRIMER, SYNNOVEX CHOICE, or SYNNOVEX ONE GROWER

IMPORTANT SAFETY INFORMATION FOR VALCOR: Do not treat cattle with Valcor within 15 days of slaughter. Not for use in female dairy cattle 20 months of age or older, including dry dairy cows; not for use in beef calves less than 2 months of age, dairy calves, and veal calves. Safety has not been evaluated in breeding bulls. Use with caution in cattle treated with cholinesterase inhibitors. This product is likely to cause injection site swelling, tissue damage (including granulomas and necrosis) may occur. These reactions have resolved without treatment. See [full Prescribing Information](#) for Valcor.

IMPORTANT SAFETY INFORMATION FOR DECTOMAX: DECTOMAX Injectable has a 35-day pre-slaughter withdrawal period. DECTOMAX Pour-On has a 45-day pre-slaughter withdrawal period. Do not use in female dairy cattle 20 months of age or older. Do not use in calves to be processed for veal. DECTOMAX has been developed specifically for cattle and/or swine. Use in dogs may result in fatalities. Consult your veterinarian for assistance in the diagnosis, treatment, and control of parasitism.

IMPORTANT SAFETY INFORMATION FOR VALBAZEN: Cattle must not be slaughtered within 27 days after the last treatment with Valbazen. Do not use in female dairy cattle of breeding age. Do not administer to female cattle during the first 45 days of pregnancy or for 45 days after removal of bulls.

IMPORTANT SAFETY INFORMATION FOR SYNNOVEX: Refer to individual labels for complete directions for use, precautions, and warnings. Reimplant only if and as directed in labeling.