

2026 RABIES TAG ORDER FORM

A new form is required for every rabies tag order.

Please fill out the order form, making sure all blanks are filled in to show tag setup. Rabies tag ordering is available all year long; however, we encourage you to order by October 15 to ensure you receive your next year's shipment by January 1. Freight charges may apply.

Ship to: _____

City: _____ State: _____ ZIP: _____ Ph: _____

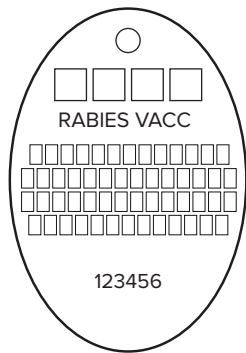
MUST BE ORDERED IN MULTIPLES OF 100

Patterson Customer Number: _____

Select one: ☐ O Rings ☐ S Hooks ☐ None

"RABIES VACC" automatically printed on tag.

ORANGE/SILVER OVAL ALUMINUM RABIES TAG



#322 Tag Color (check one): ☐ Orange Alum ☐ Silver Alum ☐ Stainless Steel

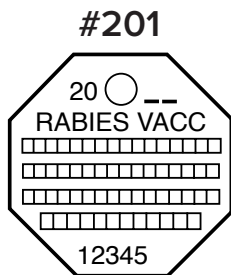
☐ Check here if no year

Year:

Start #:

Quantity: _____

Tags below are only available in stainless steel. All lines will be centered.



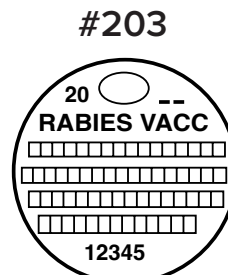
#201

☐ Check here if no year

Year:

Start #: (5-digit max)

Quantity: _____



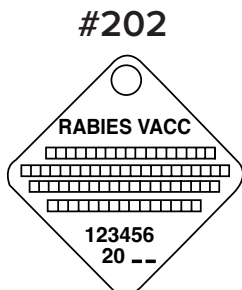
#203

☐ Check here if no year

Year:

Start #: (5-digit max)

Quantity: _____



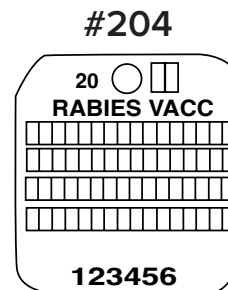
#202

☐ Check here if no year

Year:

Start #:

Quantity: _____



#204

☐ Check here if no year

Year:

Start #:

Quantity: _____

PLEASE EMAIL FORM TO:

Call _____ with questions or concerns with your rabies tag order.

Animal Health
INTERNATIONAL
a Patterson Company



2026 MINI ALUMINUM RABIES TAG ORDER FORM

A new form is required for every rabies tag order.

Please fill out the order form, making sure all blanks are filled in to show tag setup. Rabies tag ordering is available all year long; however, we encourage you to order by October 15 to ensure you receive your next year's shipment by January 1. Freight charges may apply.

Ship to: _____
City: _____ State: _____ ZIP: _____ Ph: _____

MUST BE ORDERED IN MULTIPLES OF 100

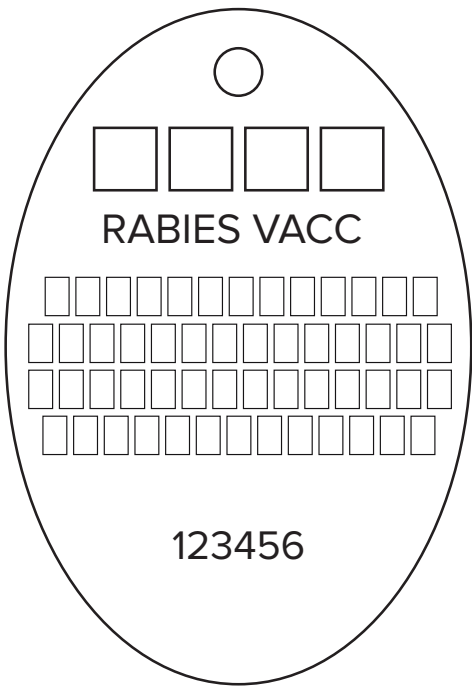
Patterson Customer Number: _____

Tag Color: *(please select one)* ☐ Orange Alum ☐ Silver Alum

Select one: ☐ O Rings ☐ S Hooks ☐ None

“RABIES VACC” automatically printed on tag.

MINI OVAL ALUMINUM RABIES TAG



☐ Check here if no year

Year:

Start #:

MAXIMUM
SPACES

13	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
14	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
14	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
13	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

All lines will be centered.

Quantity: _____

PLEASE EMAIL FORM TO:

Call _____ with questions or concerns with your rabies tag order.