

MICROCHIPPED ANIMAL REGISTRATION FORM

* COMPULSORY FIELDS

* PRINT INFORMATION

MICROCHIP NUMBER

99200 30004 08451

Please note that it is the Pet Owner's responsibility to ensure that the Pet's details are registered on the BackHome Database

VET OR WELFARE ORGANISATION

Vet Practice Number * FR 14 / 13019
Vet Practice Name * SPCA VETROOM
Vet Practice Phone - Daytime * 044 6930824

PET OWNER INFORMATION

Cell No * 0832786105
Email * ccnmotorrepairs@gmail.com
Title * Mrs
Surname * Nienaber
Street * 24 Marocia
City * Mosselbaai
Suburb * Heiderand
Area Code
Country
Province * NENKHAAP
Phone - Day time 0832786105
Phone - Night time 0832786105

Only mobile numbers in South Africa, Botswana and Namibia will be receiving SMS notifications.
* possible, please provide a personal email, not a company email.

OTHER CONTACTS

Title *	Initials *	Surname *
Cell No *		
Title *	Initials *	Surname *
Cell No *		
Title *	Initials *	Surname *
Cell No *		

CHIP DETAILS

Registration Date * 27-01-2024
Date of Implant *
Was the Microchip implanted by this veterinary practice? ☒ Yes ☐ No
Name of Vet who implanted the Chip NDTEBO NGQLE

PET DETAILS

Pet Name BAILEY
Species * DOG
Colour BRINDLE
Gender Male ☒ Female
Date of Birth 2020
Breed * STAFFIE X
Markings
Sterilised ☒ Yes ☐ No

KENNEL UNION OF SOUTH AFRICA (KUSA)

Are you a KUSA Registered Member? Yes ☐ No ☐
KUSA Registration Number
Ref Registered Name

MEDICAL

Medical Conditions
Medical Insurance Company
Medical Insurance Policy Number
Medical Insurance Phone

PROTECTION OF PERSONAL INFORMATION LAW

The client hereby agrees that his / her personal information herein supplied and / or any of his / her personal information already in possession of the veterinarian may be processed by the said veterinarian and / or its office to bring about this agreement between the client and the veterinarian. The client further agrees that the veterinarian may forward his / her personal information to Virbac, the supplier of the Chip, in order for Virbac to lodge the client's personal information on their database for tracking purposes. The client also agrees that where other relevant institutions need to track a lost animal, and they use that code on Virbac's website they will be given the personal information of the owner of said animal. The client also agrees that his / her personal information may be used by Virbac to forward him / her a Newsletter as well as to send him / her general information concerning pets. The client acknowledges that he / she has a right to object to the processing of his / her personal information for marketing purposes and unless expressly stated otherwise hereby consents to its personal information being used by Virbac (Pty) Ltd. and / or its office for the above-mentioned purposes. SIGNATURE _____

REGISTRATION PROCESS – Please use one of the following option to register on the backhome database