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* COMPULSORY FIELDS

* PRINT INFORMATION

MICROCHIPPED ANIMAL REGISTRATION FORM

Microchip Number

102 COPY 1 Practice Copy



992003000390174

FOR WELFARE ORGANIZATION

Vet Practice Number

Vet Practice Name

Vet Practice Phone - Daytime

CONTACT INFORMATION

Cell Number 083 774 7444

E-mail kagievers@gmail.com

Title MRS

Initials K

Street 4 KERSTEN

Suburb

Country

Phone - Day time

Only mobile numbers in South Africa and Namibia will be receiving SMS notifications.

Surname * JACOBS

City

Area Code HEIDELAND

Province

Phone - Night time

OTHER CONTACTS

Title * Initials *

Surname *

E-mail *

Title * Initials *

Surname *

E-mail *

Title * Initials *

Surname *

E-mail *

CHIP DETAILS

Registration Date *

Date of Implant * 23-01-2024

Was the Microchip implanted by this veterinary practice? Yes No

Name of Person who implanted the Chip

PET DETAILS

Pet Name JERRY

Year of Birth 2023

Species * JACK RUSSEL K

Breed * JACK RUSSEL K

Color WHITE + BROWN

Markings

Gender Male Female

Sterilised Yes No

MEMBER INFORMATION SOUTH AFRICA ONLY

MEDICAL

Is your pet a USA Registered Member? Yes No

Medical Conditions

USA Registration Number

Medical Insurance Company

RA Registered Name

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 (as holder of the Chip), in order for Virbac to lodge the clients personal information on their database for tracking purposes. The client also agrees that where other relevant institutions need to trace 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 its personal information for marketing purposes and unless expressly stated otherwise hereby consents to its personal information being used by Virbac (Pty) Ltd for the above-mentioned purposes. SIGNATURE