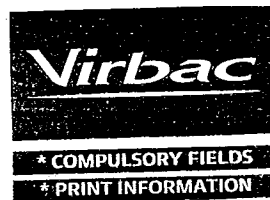


BackHome®



MICROCHIPPED ANIMAL REGISTRATION FORM



MICROCHIP NUMBER

TOP COPY - Practice Copy



992003000418823

FOR WEANERS OR ANESTHETIC

Vet Practice Number *

Vet Practice Name *

Vet Practice Phone - Daytime *

PET OWNER INFORMATION

Cell No. *

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

E-mail *

Title *

Initials *

Surname *

Street

City

Suburb

Area Code

Country

Province

Phone - Day time

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 *

Was the Microchip implanted by this veterinary practice? Yes No

Name of Person who implanted the Chip

PET DETAILS

Pet Name

Year of Birth

Species *

Breed *

Colour

Markings

Gender

Male

Female

Sterilised

Yes

No

KENNEL UNION OF SOUTH AFRICA (KUSA)

Are you a KUSA Registered Member? Yes No

KUSA Registration Number

Pet 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 (Supplier 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 _____ and Virbac RSA (1 td) Pty for the above-mentioned purposes. SIGNATURE _____