

ADOPTION CHECKLIST

ADMISSION NO:

MBY 2106

CONTRACT NO:

MBY 0089

- ☒ Admission Form
- ☒ Application for adoption
- ☒ Pre-home Inspection Report
- ☒ Adoption contract
- ☒ Copy of Identity Document or Driver's License
- ☒ Proof of Residence
- ☒ Letter from Body Corporate
- ☒ Sterilization Contract and Date of sterilization Contract
- ☒ Copy of Vaccination Record/ Certificate
- ☒ Microchip
- ☒ Microchip Registration- chip number

Adoptee INFO:

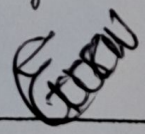
Name & Surname Neska Potgieter

Contact INFO: 062 982 9452



Completed by: Kay levers

Date: 26/03/2024

Manager: 

Date: 26/03/2024

FUTURE POST HOME INSPECTION (every 6 Months)	
Date of Inspection	Date of Inspection

This checklist must be completed and attached to the front of every adoption that has been processed.
All documents relating to a single adoption must be kept together in a single bundle, in order of checklist.

ADMISSION, ASSESSMENT AND HISTORY RECORD

Loaded.



Garden Route

KENNEL No. <u>K18 K12 K37</u>				ADMISSION No. <u>MBY2106</u>		
Stray	<u>Surrender</u>	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	<u>05/02/24</u>		Time in	<u>11:00</u>	Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	☒ Yes ☐ No	Lost & Found Date checked	<u>05/02/24</u>
Microchip/Collar or ID tag found	☒ Yes ☐ No	Date scanned or checked	<u>05/02/24</u>	Microchip or ID Tag number		

DESCRIPTION & HISTORY	<u>Dog</u>	Cat	Other species (Specify)					
	Breed	<u>Labrador</u>	☒	Colour and Markings	<u>Black</u>			
	Condition	<u>Fair</u>		Sex	<u>Female</u>	Age	<u>6 weeks</u>	
	Temperament	<u>Good</u>		Sterilisation details	<u>NO</u>	Name		
	Coat	<u>Thin</u>	Tail	<u>Long</u>	Teeth Condition	<u>Fair</u>	Ears	<u>Down</u>
	Area found / collected from	<u>EXT 8</u>				Date	<u>05/02/24</u>	
	Reason for surrender							

ASSESSMENT			Surrendered by	☒ Name	<u>Abraham Jansen</u>	
GOOD WITH:	Yes	No	Found by			
Children			Residential Address	<u>427 Abraham Street</u>		
Cats				<u>EXT 8</u>		
Other Dogs			Postal Address	<u>N/A</u>		
Livestock/Other			Tel (H)	<u>N/A</u>	Tel (W)	<u>N/A</u>
DO THEY:	Yes	No	Cell	<u>N/A</u>		
Jump Fences			Email	<u>N/A</u>		
Run Away			Donation R	<u>N/A</u>	Cash	Card
COMMENTS:			EFT	(Receipt No.) <u>N/A</u>		

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: N/A Case No: N/A Inspector: Luciano

STATEMENT OF SURRENDER

I do hereby certify that I **DO / I DO NOT** own the animal/s described above, that **IT IS / IT IS NOT** a stray and I **DO / I DO NOT** know where it comes from. I also freely surrender all interest, if any, therein to the SPCA, and I request that the animal be dealt with as deemed advisable in the discretion of the SPCA. It is expressly agreed that neither the SPCA nor its officers and employees will incur any obligation to me on account of such disposition of said animal/s. I confirm that I am over the age of eighteen (18) years of age. **Also see "Conditions" on reversed side.**

Hiermee verklaar ek dat ek dier/e hierbo beskryf **BESIT / NIE BESIT NIE**, dat dit 'n **RONDLOPER / NIE RONDLOPER NIE** is, en dat ek **WEET / NIE WEET** waar dit vandaan kom nie. Ek doen ook vrywillig afstand van alle belange daarin, indien enige, ten gunste van die DBV en ek versoek dat die dier hanteer word soos wat die DBV goed ag. Daar word uitdruklik ooreengekom dat nog die DBV nog sy amptenare, en werknemers enige verpligtinge het, teenoor my ten opsigte van die hantering van die dier/e. Ek bevestig dat ek bo die ouderdom van agtien (18) jaar is. **Sien ook die "Voorwaardes" op die agterblad.**

Signature	<u>Refer to MBY 1825</u>	Witness for Society	
FOR OFFICE USE: PENDING ADOPTION		Details of second Applicant	
Details of first Applicant		Details of third Applicant	

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐ On Date: _____



ur terug na:
raatsak X18, Johannesburg, 2000

Tjekrekeningnommer:

41-0266-6861

008140

006074

MEJ HJI POTGIETER
21 DA GAMASTRAAT DA NOVA
MOSSELBAAI
6506

Langeberg Mall
Winkel 84 Langeberg Mall
Posbus 577
Port Elizabeth
6000



044 601 6800

Tjekrekeningstaat

ADMISSION No.
TOELATINGSNR.

MBY0089



ADOPTION CONTRACT

Garden Route

DOG / CAT Breed

Male/Female

Microchip and or ID Tag



992003000418780

This animal has been given a good home with responsible and loving care. Ownership of an animal yields much pleasure and satisfaction. It also has its obligations and responsibilities. The fact that the animal has been in our care usually indicates that someone has, in the past, failed to recognise these responsibilities.

- I do hereby confirm and undertake that:
- I am over eighteen (18) years of age.
- All family members agree to the adoption and will abide by the conditions in the contract.
- I will not part with possession of the animal except to **return** it to the SPCA if for any reason I am unable to keep it. In the event that I fail to do so, I agree that I will be liable to pay to the SPCA all costs which they may incur in obtaining confirmation that the animal has been homed to a suitable person, with suitable premises. In the event that this is not the case, I also agree that I will be liable for all costs which the SPCA may incur, including all legal costs on an attorney and client scale, in recovering possession of the animal.
- I will give the animal a fair chance to adjust to its new home.
- I understand that donations are not refundable or transferable.
- I will feed and house the animal to the Society's satisfaction.
- I will **not chain or cage** the animal, and understand that if it is found chained or caged, it will be removed from my care immediately.
- I can afford the services of a private veterinary practitioner.
- I will ensure that vaccinations are kept up to date and in the case of injury or illness professional veterinary treatment will be provided.
- I understand that in case of illness (not injury) occurring within the first seven (7) days of adoption, I may bring the animal to the Society to be attended to by its veterinarian (at the discretion of the Society) at no charge to myself.
- I will ensure that the animal is sterilised as stipulated by the Society.
- I undertake to ensure that the animal has identification at all times, either in form of a microchip or a collar and tag - only **elasticated or quick release collars** may be used for cats.
- My property is adequately enclosed and at no time shall I knowingly allow my dog to roam the streets.
- I will notify the Society within forty-eight (48) hours should the animal die or go missing.
- I know and understand the "By-Laws pertaining to animals" of the Municipality in which I reside.
- I will permit an authorised officer of Society to visit my premises from time to time, to be assured that the animal is being treated in accordance with this Policy, and I will allow the Society to repossess the animal, if in the Society's opinion, the terms of this policy are not being reasonably adhered to.
- I will not use or allow the animal to be used as a watchdog on any industrial or commercial premises.
- I will notify the Society of any change of address in writing by registered post with seven (7) days.

* I agree to never harm, neglect, abuse or abandon the animal that I adopt.
* I confirm that I have never been convicted nor charged with cruelty or neglect of any animal.

I hereby declare that I have read through the Adoption Contract, and that I agree and acknowledge that the above contract is legal and binding.

ADOPTER NAME - Prof/Dr/Mr/Mrs/Ms (Including initials)
NAAM - Prof/Dr/Mnr/Mvr/Mej (Insluitende voorletters):

HOME ADDRESS

WOONADRES: 21 Do Gama, Da Nava

TEL No (H):

TELEFOON Nr (H):

CELL No:

SELFOON Nr: 062 982 9452

E-MAIL:

E-POS: neskapotgieter3@gmail.com

ADOPTION FEE:

AANEMINGSVOOI: R 750

cash /eft / card

kontant /eft / kaart

DONATION:

DONASIE:

KWITANSIE Nr

RECEIPT No. 1724

VEHICLE REG No.

VOERTUIG REG Nr. CBS 43020

VEHICLE MAKE:

VOERTUIG MAAK: Ford

COLOUR:

KLEUR: wit

SIGNATURE

HANDTEKENING: Potgieter

DATE / DATUM:

26/03/2024

- Ek onderneem en bevestig dat:
- Ek ouer as agtien (18) jaar is.
- Alle familieleden stem saam oor die aanneming en sal al die voorwaardes in die kontrak nakom.
- Indien ek om enige rede nie langer die dier kan versorg nie, onderneem ek om dit alleenlik aan die DBV **terug** te besorg. As ek om enige rede nie daartoe in staat is om die dier te hou nie sal ek nie besit van die dier afstaan nie tensy ek dit aan die DBV terugbesorg. Ingeval ek nie so optree nie, aanvaar ek aanspreeklikheid om alle onkoste aan die DBV te betaal wat hulle mag aangaan in die verkryging van bevestiging dat die dier by 'n geskikte persoon met aanvaarbare huis en erf gehuisves is. Ingeval dit nie die geval is nie, aanvaar ek ook aanspreeklikheid vir alle onkoste wat die DBV mag aangaan, insluitende die regskoste volgens 'n prokureur en kliënt skaal, in die terugbesorging van die dier.
- Ek sal die dier 'n redelike kans gee om aan sy nuwe tuiste gewoon te raak.
- Ek begryp dat donasies nie oordraagbaar is of terugbetaal word nie.
- Ek onderneem om die dier te versorg en te huisves na die Vereniging se tevredenheid.
- Ek sal **nie die dier vasketting of gehok hou nie**, en aanvaar dat indien die dier wel in my besit vasgeketting of gehok gevind word, die Vereniging dit dadelik sal verwyder.
- Ek kan die dienste van 'n private veeartsnykundige bekostig.
- Ek onderneem om die dier se nodige inentings op datum te hou en in die geval van siekte of beserings sal ek 'n veearts se dienste gebruik.
- Ek verstaan dat, indien die dier siek word (beserings uitgesluit), binne sewe (7) dae van aanneming, ek die dier na die Vereniging mag bring vir behandeling deur sy veearts sonder enige koste (volgens die Vereniging se diskresie).
- Ek onderneem om toe te sien dat die dier gesteriliseer word soos deur die Vereniging voorgeskryf.
- Ek onderneem om my dier te identifiseer ter alle tye met behulp van 'n mikroskyfie of halsband en naamplaatjie - **slegs rekbandjies** mag vir katte gebruik word.
- My erf is behoorlik omhein en ek sal nie toelaat dat my hond in die straat rondloop nie.
- Ek sal binne agt-en-veertig (48) uur die Vereniging in kennis stel indien die dier sterf of verlore raak.
- Ek verstaan en ken die "By-wette aangaande diere" van die Munisipaliteit waarin ek woonagtig is.
- Ek sal toelaat dat 'n gemagtigde persoon van die Vereniging my erf kan besoek van tyd tot tyd, om te verseker dat die dier wel versorg word soos in die Uitplasingsbeleid uiteengesit. Ek sal toelaat dat die Vereniging die dier in besit neem indien die voorwaardes en reëls van hierdie beleid nie redelik nagekom word nie.
- Ek sal nie die dier gebruik of toelaat dat die dier as 'n waghond gebruik word op enige industriële of kommersiële perseel nie.
- Ek sal die Vereniging binne sewe (7) dae per geregistreerde pos in kennis stel van enige verandering van adres

* Ek onderneem om nooit die dier wat ek aanneem te mishandel verwaarloos of te verlaat nie.
* Ek verklaar hiermee dat ek nog nooit skuldig bevind of aangekla is van wreedheid of verwaarloosing van enige dier nie.

Ek verklaar hiermee dat ek die Uitplasing Kontrak gelees het, en dat ek bevestig en erken dat die kontrak wettig en bindend is.

Ms Neska Potgieter

ID/PASSPORT No.:

ID/PASPOORT Nr.: 0004200263087

(B):

(W):

FAX No:

FAKS Nr:

WITNESS FOR SOCIETY:

GETUIE VIR VEREENIGING: [Signature]

MBY 2106
Black Fluffy
K37

APPLICATION TO ADOPT AN ANIMAL

PLEASE NOTE: We retain the right to decline this application

The following documents to be attached: - ID, proof for residence, proof that pets are allowed.

NAME - Prof/Dr/Mr/Mrs/Ms (including initials): Ms Neska Potgieter

HOME ADDRESS: 21 DA Gama, Da Nova, Mosselbaai

ID NO.: 0004200263687

POSTAL ADDRESS: "

TEL NO (H): _____ (B): _____

CELL NO: 062 982 9452 FAX NO: _____

EMAIL: neskapotgieter3@gmail.com

Address where animal will be kept: 21 Da Gama, Da Nova Mosselbaai

Occupation: student

Do you own or rent your property: own Do you have consent from owner / Body Corporate? yes

Are you a student with consent to keep pets: (YES/NO)

Reason for wanting animal: Animal lover

Is the animal for yourself? (YES/NO)

Is the animal a replacement for a pet which has died from: Distemper/Parvovirus/Snuffles/Cat Flu/Biliary (YES/NO)

What breed of dog or cat are you interested in? Cross breed

Can you afford private fees? yes Who is your vet? _____

How many animals live on the property? DOGS? _____ CATS? 1 OTHERS _____

What are the sexes of your animals? DOGS: Male _____ Female _____ Cat DOGS: Male _____ Female ✓

Are all your animals sterilised? Give details yes

How many dogs and cats have you owned in the last 3 years? DOGS? _____ CATS? 1 OTHER? _____

Which animals do you still have, and what happened to the others? still have the cat

Is your property fenced and has a proper gate? yes Will you chain/ an animal? _____

Full description of the fencing and gate: high wall Height: 2m

What shelter is provided: OUTDOORS _____ KENNEL _____ OTHER inside

Have you previously had pets from an SPCA? No Are there children under 10 in your household? No

Pre Home Inspection Fee: _____ Receipt No: _____

Declaration: The above information is true and correct

I confirm that I have never been convicted nor charged with cruelty or neglect of any animal.

SIGNATURE OF APPLICANT Potgieter Date of application 07/03/2024



ADOPTION No

ADMISSION

PRE AND POST HOME INSPECTION FORM

PASSED: ☒ YES ☐ NO

DATE UNDERTAKEN:

26/3/24

TIME:

10:20

NAME OF APPLICANT: Neska PotgieterADDRESS: 21, Da Gama, Da Nova,

HOME TEL No:

CELL No: 062 982 9452ANIMAL(S) ADOPTING: DogSEX: FemaleAGE: 2 months

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION

Type of fence: <u>Bricks</u>		Height of fence: <u>2 meter</u>	
Any sign of Kennel/Shelter?	YES ☒ / NO ☐	Any sign of Chain/Runner?	YES ☐ / NO ☐
Is the front yard separated from the back?	YES ☐ / NO ☐	If yes, what partitioning?	
Any hazards? (pool, rubble, razor wire, etc)	YES ☐ / NO ☒	Specify:	
Does applicant live at the address?	YES ☒ / NO ☐	How many animals are on the property?	

DESCRIPTION OF ANIMALS ON PROPERTY

	1	2	3	4	5
BREED	<u>Cat</u>				
SEX	<u>Female</u>				
AGE	<u>13 year</u>				
STERILIZED	YES ☒ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS

Big property Big walls
Happy cat good condition

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

- ☒ SMALL DOGS
☒ MEDIUM DOGS
☐ LARGE DOGS

- ☒ CATS
☐ EQUINE
☐ OTHER (specify) _____

INSPECTED BY: KUR

SPCA:

Muse/Boy

SIGNATURE:

[Signature]

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

SADO

SOUTH AFRICA

DRIVING LICENCE
BESTUURSLIENSIE
CARTA DE CONDUCAO

ZA

HJI POTCIETER

ID No: 02/0004200263087

FEMALE

Birth/Geboorte: 20/04/2000 ZA Restr./Beperk:

Lic. No./Lisensienr.: 60150001CW16 No: 1

Valid/Geldig: 08/03/2019 - 07/03/2024

Issued/Uitgereik: ZA

Code/Kode:

B

Veh. restr./Voertuigbeperking:

0

First issue/Eerste uitreiking:

08/03/2019



H. J. Potcieter



STERILISATION CONTRACT

PLEASE READ CAREFULLY - THIS IS A LEGAL DOCUMENT

CONTRACT No. MBY 0089

DATE: 26/03/24

between Mosselbaai SPCA

and

Name Neska Potgieter

Address 21 Da Gama, Da Nova, Mosselbaai

Telephone Numbers (H) 062 982 9452 (B) _____

to have spayed / neutered / vasectomised (delete whichever is not applicable):

Animal's Name _____ Sex Female Age 2 months

Description Labrador X

On (due date) _____ Adoption Form No. MBY 0089

on the understanding that you will arrange to have this done at the Mosselbaai SPCA Veterinary Hospital.

1. Should the animal be taken to another Veterinary Hospital or Clinic for this surgical procedure without the written authorisation of this Society, the owner will be responsible for the payment of any fees incurred.
2. If the animal is not sterilised on the due date mentioned above, the Society **reserves the right to confiscate** the animal and **NO MONEY WILL BE REFUNDED**. The owner agrees that a member of the SPCA's staff may enter upon their premises in order to remove and/or inspect the animal.
3. This animal cannot be passed on to a new owner. The original sterilisation contract will be cancelled and a new one issued in the new owner's name free of charge.
4. In the event of the animal's death, proof must be submitted to the Society within seven (7) days.
5. The owner undertakes to bring the section 1 above to the attention of the Veterinary Practitioner who may, or will be, consulted by the owner.

I have read and fully understand the conditions above, which I accept unconditionally.

Signature of new Owner: N Potgieter For SPCA: [Signature]

CONFIRMATION OF STERILISATION:

Vet: _____ Signed: _____

Date: _____

MY OWNER

NAME **Ms Neska Potgieter**

POSTAL ADDRESS

STREET ADDRESS **21 Da Gama**
Da Nova

HOME PHONE

WORK PHONE

CELLPHONE **062 982 9452**

BREEDER DETAILS

ME

SPECIES **Canine**

BREED **Labrador-x**

COLOUR **Black**

SEX **Female (♀)**

DATE OF BIRTH

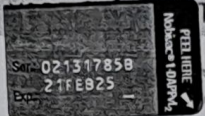
MICROCHIP 
992003000418780

FEATURES/MARKS

NEXT VACCINATION DUE

DATE	DATE	DATE
22/3/24		

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
23/2/24	 Animal Health	N.N
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	

One of the very best things you can do to give me a long and healthy life is to vaccinate me against common diseases.
My mother gave me immunity during my first few weeks by disease-fighting antibodies in her milk.
Now it is up to you to keep my vaccinations up to date as advised by my vet!

Nobivac® DHPPi (Reg. No. G2377 Act 36/1947), Nobivac® KC (Reg. No. G2604 Act 36/1947), Nobivac® Canine-1 DAPPV (Reg. No. G3892 Act 36/1947), Nobivac® Feline-HCP (Reg. No. G3880 Act 36/1947), Nobivac® Tricat Trio (Reg. No. G3712 Act 36/1947), Nobivac® Rabies (Reg. No. G2207 Act 36/1947), Quantel® Tablets (Reg. No. G2717 Act 36/1947) Contains Praziquantel (isoquinoline) 50 mg/tablet and Fenbendazole (benzimidazole) 500 mg/tablet. Exitel Plus (Reg. No. G4226 Act 36/1947) Contains Praziquantel 50 mg, Pyrantel 50 mg (equivalent to 144 mg pyrantel embonate) and Febantel 150 mg. Exitel Plus XL (Reg. No. G4227 Act 36/1947) Contains Praziquantel 175 mg, Pyrantel 175 mg (equivalent to 504 mg pyrantel embonate) and Febantel 525 mg. Bravecto® (Reg. No. G4083 Act 36/1947) each chew contains 25 mg Fluralaner per kg body weight.



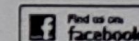
Quantel

Exitel Plus

Exitel Plus XL



Bravecto



facebook.com/BravectoSouthAfrica

[illegible]

Quantel  **EXitел Plus** **EXitел Plus XL**
WORMER FOR DOGS AND CATS DEWORMING FOR HAPPIER HEALTHIER DOGS

NOTE TO MY OWNER:
Regular vaccines as prescribed by my veterinarian and
deworming every 2 weeks for under 12 weeks of age and every 3
months when I'm older are very important for keeping me healthy!

This certificate also serves as a movement permit for this animal within the Republic of South Africa on condition that:

1. It accompanies the animal;
2. Property of origin is free from quarantine restrictions imposed for rabies control purposes;
3. The rabies vaccine immunity is valid;
4. The certificate was signed in the space below to confirm that the condition in 2 and 3 were met before the intended movement.

DATE _____

BY VETERINARIAN

SIGNATURE

PRACTICE STAMP

VETERINARIAN'S SIGNATURE _____

DATE _____

DOCTOR'S NAME

PRACTICE STAMP



Intervet South Africa (Pty) Ltd, Reg. No. 1991/006580/07
20 Spartan Road, Spartan, 1619, RSA | Private Bag X2026, Isando, 1600, RSA
Tel: +2711 923 9300, Fax: +2711 392 3158, Sales Fax: 086 603 1777

Vaccination protects your pet against

DANGEROUS GERMS

that can be everywhere.

CONTAMINATED WATER

PARASITES

DOG PARKS

SHARED TOYS

HOUSE GUESTS

SHOES & CLOTHING

VISITING PETS

THE GROOMER

BOARDING FACILITIES

SHARED FOOD OR BEDDING

THE ENVIRONMENT

PET'S NAME _____

MY VET

GARDEN ROUTE SPCA
MOSSEL BAY

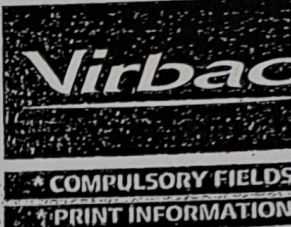
18 BILL JEFFERY AVE
KWANONQABA

044 693 0824
072 287 1761
theatrem@grspca.co.za

Consulting Hours

Monday & Wednesday: CLOSED
Tuesday & Thursday: 9:00 to 11:00 and 15:00 to 16:00
Friday – 12:00 to 16:00
Saturday, Sunday & Public Holidays: Closed

BackHome®



MICROCHIPPED ANIMAL REGISTRATION FORM



Printed copy

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 *
Vet Practice Name *
Vet Practice Phone - Daytime *

PET OWNER INFORMATION

Cell No. * 062 982 9452
E-mail * neskaporgieter3@gmail.com
Title * MS Initials * N
Street 21 DA ~~DA~~ GAMA
Suburb Da Nova
Country
Phone - Day time

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

Surname * POTGIETER
City
Area Code Da Nova
Province
Phone - Night time

OTHER CONTACTS

Title * Initials *
E-mail *
Title * Initials *
E-mail *
Title * Initials *
E-mail *

Surname *
Surname *
Surname *

CHIP DETAILS

Registration Date * 26 - 03 - 24
Date of Implant * 08 - 03 - 24

Was the Microchip implanted by this veterinary practice? ☒ Yes ☐ No

Name of Person who implanted the Chip NDYEBU NGQELE

PET DETAILS

Pet Name
Species * DOG
Colour BLACK
Gender Male ☒ Female

Year of Birth 2024 JAN
Breed * Labrador X
Markings
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 client's personal information on their database for tracking purposes. The client also agrees that where other relevant institutions need 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 RSA (Ltd) Pty for the above-mentioned purposes. SIGNATURE

REGISTRATION PROCESS: Please use one of the following option to register on the BackHome database:

1. On-line

Log onto www.backhome.co.za. Complete the registration process.

or call the BackHome team on 0800 222 546 (TOLL FREE) or 0864 570 463.