



Registration Application

This form can be used where a microchip has not been registered on ANY national database previously. Please search chip number at www.petaddress.com.au prior to completing this form.

Email to registrations@homesafeid.com

Fax to 1300 537 141

Post to Central LPO PO Box 1033 WILLAGEE CENTRAL WA 6156

Customer Agent ID: _____

Business Name _____

ANIMAL DETAILS

Microchip Number: _____ Affix Barcode Sticker Here

Animal Breed: _____

Species: _____

Animal Name: _____

Animal Color: _____

Animal DOB: ____ / ____ / ____ DD/MM/YYYY

De-sexed: Yes

No (if "No" Exempt) Yes No

Animal Sex: Male Female

Produced Litter: Yes No

Municipal Council: _____

Dog Breed Declared: Restricted Menacing Dangerous

Detail Dog Aggressive behaviour (if know):

Animal Address (if different to Owner):

Street Address: _____

City/Suburb: _____ Post Code _____

OWNER DETAILS

Mr/Mrs/Ms: _____ Given Name: _____

Surname: _____

Business Name: _____

Street Address: _____

Owner Town: _____

State: _____ Post Code _____

Daytime Phone: _____

Mobile Phone: _____

Owner Email: _____

Important:

Your email address will be used to advise of your online password and for sending confirmation of establishment of this application.

Alternate Given Name: _____

Alternate Phone: _____

Warranty Statement:

As the signatory/owner I verify that I am the owner and the information provided on this form is correct and I consent to HomeSafeID releasing the above information to an authorised agent for purpose of reuniting me with the animal identified above and for any purpose a person authorised under that act operates.

Privacy Statement:

HomeSafeID Warrants the information provided by the owner is held in accordance with Federal and State Privacy Acts and will not be provided to any unauthorised person or entity.

Owners Signature: _____

PAYMENT DETAIL

EFT Deposit to: HomeSafeID BSB 032-267 Account 250400 (Please send remittance with form)

Credit Card information provided (see below) or Cheque or Money Order for **\$20.00** enclosed (Please Note — Australia Post charges apply for Money Orders)

Credit Card Information: Visa or MasterCard (tick one please)

Name on Card: _____

Credit Card Number: _____ / _____ / _____ Expiry Date _____ / _____