

Donkey & Mule Society of New Zealand (inc)



MICROCHIPPING FORM

Complete this form and send to the Registrar
at the address shown on the Society's website

OWNER TO COMPLETE

Registered Name of Donkey.....

Reg No.....

Name of Owner.....

Address.....
.....

Phone Number.....Fax Number.....

Email.....

PERSON MICROCHIPPING TO COMPLETE

Microchip Number _____
Microchip Placement _____ _____

I/We.....

declare that the information included in this application is correct to the best of my/our knowledge.

Signed.....Date...../...../.....

(The information contained in this form becomes the property of
the Donkey & Mule Society of New Zealand Inc)