

Mail or Fax to: AVID / PETtrac 3185 Hamner Ave. Norco, CA 92860 1-951-737-8967 fax pettrac@avidid.com

Office use only

## **PETtrac Registration Form**

Microchip Number*			If you have a barcode label place it here.	
Account Holder Information Alternate Information				
Last Name * First Name* Mid	ldle Initial	Last Name	First Name	Middle Initial
Address*		Address		
City* State* Zip*		City	State	Zip
Home Phone* Work Phone		Home Phone		Work Phone
Cell Phone* Email		Cell Phone		Email
Pet Information Veterinarian Information				
Name*		Name		
Species* (Dog/Cat/Bird/Other) Breed	/	Facility		
Gender Neutered/Spayed Date o	f Birth	Address		
Color / Markings Weight		City	State	Zip
Medication		Phone Number		Email

## Authorization:

I hereby authorize Avid Identification Systems, Inc. and PETtrac to use or disclose information provided for recovery purposes and to promote the wellbeing of the pet. I consent to and agree to comply with the PETtrac terms of use as they exist on the date of my signature on this form or as subsequently adopted or amended. Avid provides a microchip registration, and lost pet recovery service. We do not arbitrate ownership of the pet.

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Authorized Signature Required

\* Required

\*\* Prices are subject to change without prior notice

Veterinarian Inform	nation	
Name		
Facility		
Address		
City	State	Zip
Phone Number		Email

## Charges \* \$31.95 single pet registration \*\*

Payment: Check or Money Order Credit Card

(If paying by check or money order you must mail in this form with your check or money order and make payable to AVID.) Type:

○Visa ○MC ○Discover ○AmEx

Credit Card #

Expiration	Security Code	Billing Zip Code	
Printed Name	on Card		Date
Х			

Credit Card Signature