



Subscription Form | Reptiles

With Payment Required

This form can be used to register a microchip that has been previously implanted and not already registered with the Central Animal Records national database. Please note: You are required to have your pet scanned by a scanning centre such as a vet clinic to verify the microchip number is correct. The form must be signed by the scanning centre before submission to us. Incomplete forms will be returned to you.

It is vital that all information on this form, if known, is provided.

An Identification Certificate will be forwarded to the owner once details have been entered. The information provided on this form is used to ensure that the reptile can quickly be returned to its owner.

ANIMAL DETAILS

Implant Date: _____

Date of Birth/Hatch: _____

Reptile Name: _____

Species (Common Name): _____

Sex: Male / Female / Unknown _____

Implant Site: _____

Microchip Number:

SCANNING INFORMATION

Vet Name: _____ Authorisation Number: _____

Clinic Name: _____ Telephone: _____

Address: _____

Suburb: _____ Postcode: _____

I acknowledge that the information contained is correct and that the owner has been advised of the privacy statement. Must be signed once animal is scanned and microchip number is verified.

Vet Signature: _____ Date: / /

OWNER/BREEDER DETAILS

NO JOINT OWNERS | OWNER MUST BE 18 OR OLDER

Title: _____ | Surname: _____ Given Name: _____ Breeder Supplier No. (QLD Only) _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Council/Municipality: _____

Mobile Phone: _____ Home Phone: _____ Work Phone: _____

Email: _____

Alternate Contact Name: _____ Alternate Contact Number: _____

Alternate contacts have no authority over the account to confirm or change details

By signing, I declare that the information above is true and correct. I confirm that I have read and understand Central Animal Records Privacy Policy as it appears on www.car.com.au

Signature: _____ Date: / /

SERVICE TYPE

Select One:

\$10.00 Lifetime Subscription + (Digital Certificate)

\$20.00 Lifetime Subscription + (Deluxe Certificate)

PAYMENT DETAILS

Name On Card: _____

Card Number: _____

Expiry Date: _____ CVC: _____

Paid At Vet

OR

Tick this box if you have already paid at your vet or scanning centre.

Note: We will invoice the Vet or scanning centre.

Cheque or Money Order

OR

Tick this box if you have enclosed a cheque or money order

Note: Australia Post charges apply for Money Orders

Contact Me For Payment

OR

Tick this box if you would like us to contact you to make payment over the phone.

Note: Transfers will not be processed until payment is made

Please send completed form to one of the following:

Email: info@car.com.au

Post: 22 Fiveways Boulevard, Keys borough, VIC 3173

Fax: 03 9706 3198