



Vet Reference

**WEB
TEMPLATE**

Please pass this form to your vet to complete. It is for one pet only, if you have multiple pets, please copy this template.

Owner name		Pet name	
Pet species		Pet date of birth	
Vet name		Vet address	
Vet contact number			

I confirm that this pet is:

	Microchipped, microchip number:
	Neutered/spayed
	Is up to date on all vaccinations as advised by vet
	Receives flea and worm medication as advised by vet. State frequency:
	Has regular check-ups as advised by vet (at least annually)

If you cannot confirm all of the above, please detail why (continue on a separate sheet if necessary):

DISCLAIMER: all information is provided to the latest client information available. Neither we nor AdvoCATS can be held liable for any changes to the animal in question since their last appointment with us.

For more information about AdvoCATS visit: www.advocatseastmids.org.uk

On behalf of(vet practice) I confirm that I have read and understood the above disclaimer and that the details provided on this form are correct. These details may be shared with AdvoCATS, and I understand AdvoCATS may contact us to confirm the details provided.

Signed: _____ Name: _____ Date: _____



AdvoCATSeastmids
Working hand in paw with rescues, landlords & tenants