

SAFE Pet Scheme Registration Form



1. Tell us about yourself

Title: _____ Date of Birth: _____
First Name: _____
Surname: _____
Address: _____

Postcode: _____ Telephone Number: _____
Email: _____

2. Tell us about your pet

Name: _____ Date of Birth: _____
Species: _____ Breed: _____
Description (colour & coat): _____
Is your pet microchipped? (please circle): Yes No
Microchip Number: _____
Any special dietary or veterinary needs: _____

Likes: _____
Dislikes: _____

3. Tell us about your Vet

Name: _____
Address: _____

Postcode: _____ Telephone Number: _____

By completing this form, you are consenting to be contacted by email in relation to the SAFE Pet Scheme, Team SAFE, as well as allowing us the opportunity to inform you of other activities you may be interested in to help support the vital work of Stray Aid. You can opt out at any time following receipt of your initial email.

Once completed, please return this form to: **SAFE Pet Scheme, Stray Aid Rescue Centre, Cornforth Lane Coxhoe, County Durham DH6 4EL**. Please also ensure you leave instructions in your will to confirm your wishes. The suggested wording we use is: *"My executors should contact SAFE Pets Scheme, Cornforth Lane, Coxhoe DH6 4EL, tel 0300 9994247, registered charity no. 1117372 to arrange for the care of my cat/dog (name) which I own at the time of my death."*