

AKC Reunite Microchip Registration

Pet Information

Pet Name: _____

Species: Dog Cat Other: _____

Breed: _____

Male Female Spay/Neutered: Yes No

Date of Birth: _____

Color/Markings: _____

Registry (if applicable): AKC Other: _____

Registration # (if applicable): _____

Microchip #: _____

Or place barcode sticker here.

Pet's Veterinarian

Name of Clinic: _____

Phone: _____

Primary Contact Information

First Name: _____

Last Name: _____

Address: _____

City: _____ State: _____

Zip: _____ Country: _____

Home Phone: _____

Work Phone: _____

Mobile Phone: _____

Text Message E-mail: _____

E-Mail: _____

Communication Preferences

Periodically, AKC Reunite will send you information directly related to your pet's enrollment. Please check the information you DO NOT want to receive:

- Promotions/ news from AKC Reunite
- E-mail promotions/news from AKC Reunite
- Share my information with third parties for pet related offers.

Note: Enrollment in AKC Reunite will help to ensure safe return of your pet

Alternate Contact Information

First Name: _____

Last Name: _____

Home Phone: _____

Work Phone: _____

Mobile Phone: _____

E-Mail: _____

Note: Enrollment in AKC Reunite will help ensure safe return of your pet when found, but does not signify ownership. Prices subject to change.