

Microchip Scanning Authorization

Before scanning your pet for a microchip we will need you to fill out this form

Mandatory

First Name _____

Last Name _____

Preferred contact phone number (____) _____

Description of Animal: _____

I understand and agree that, should the scan reveal an existing microchip, NBK Bangor VTF will share my name and telephone number with the individual registered to the microchip and the microchip company. I agree to support all reasonable efforts to ensure this pet is returned to its rightful owner should it have one. I further understand and agree that my address may be shared with law enforcement authorities for this purpose.

Signed _____

Date _____

Physical Address *(will not be shared with anyone other than law enforcement authorities)*

E-mail address _____

Additional phone number (__) _____

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