

Form V – Register of Health and Medical Records of Dogs/Pups**Part 1: Animal Information**

Dog Tag Number ID	
Microchip Number	
Name	
Sex	
Age	
Breed	
Colour and Markings	
Dam Microchip No.	
Sire Microchip No.	
Date of Birth	
Date of Sale/Transfer/Rehabilitation	
Date of Death	
Technique of Disposal	

Part 2: Breeding/Mating Information

Record 1	
Date of Mating	
Place of Mating	
Name of person handling mating	
Name and Microchip No. of dog mated with	
Name and Address of Owner of dog mated with	
Date of Whelping	
No. of Pups Whelped (Sex + Markings)	

Record 2	
Date of Mating	
Place of Mating	
Name of person handling mating	
Name and Microchip No. of dog mated with	
Name and Address of Owner of dog mated with	
Date of Whelping	
No. of Pups Whelped (Sex + Markings)	

Record 3	
Date of Mating	
Place of Mating	
Name of person handling mating	
Name and Microchip No. of dog mated with	
Name and Address of Owner of dog mated with	
Date of Whelping	
No. of Pups Whelped (Sex + Markings)	

Record 4	
Date of Mating	
Place of Mating	
Name of person handling mating	
Name and Microchip No. of dog mated with	
Name and Address of Owner of dog mated with	
Date of Whelping	
No. of Pups Whelped (Sex + Markings)	

Record 5	
Date of Mating	
Place of Mating	
Name of person handling mating	
Name and Microchip No. of dog mated with	
Name and Address of Owner of dog mated with	
Date of Whelping	
No. of Pups Whelped (Sex + Markings)	

Part 3 - Medical History and Record

Date	Observation	Treatment	Vet. Sign & Reg. No.