Phone (03) 8329 1100 Fax (03) 8329 1000 Email info@grv.org.au ABN 76 642 748 029



## **GRV MICROCHIP REGISTRY**

## **CHANGE OF OWNERSHIP (RETIRED GREYHOUND)**

This form is to notify the GRV Microchip Registry if the ownership of a retired (pet) greyhound changes, to ensure that the current owner of the greyhound can be easily identified by a local council, pound or shelter should the greyhound become lost (particularly if found without its collar and council tags).

This form may be completed by the previous or the new owner but must be signed by both parties. Please complete the below information to update your contact details on the GRV Microchip Registry and return to GRV, 46-50 Chetwynd Street, West Melbourne VIC 3003 or by email to <a href="mailto:retirements@grv.org.au">retirements@grv.org.au</a>.

Greynound Name:		Microchip number: 95600000				
Ear Brand:		ex: Mal	le 🗆	Fema	le	
Colour:		e-sexed	l: Yes		lo	
	·					
Previous Owner						
First Name:	Surname:			Date of birth:		
Street Address:						
Town / Suburb:	Postcode:					
Email address:						
Phone number:	(H)	(W)		(M)		
New Owner						
First Name:	Surname:			Date of birtl	h:	
First Name: Street Address:	Surname:			Date of birtl	h:	
	Surname:		Postcode:	Date of birtl	h:	
Street Address:	Surname:		Postcode:	Date of birtl	h:	
Street Address: Town / Suburb:	Surname:	(W)	Postcode:	Date of birtl	h: (M)	
Street Address: Town / Suburb: Email address:		(W)	Postcode:	Date of birtl	(M)	
Street Address:  Town / Suburb:  Email address:  Phone number:	(H)	(W)	Postcode:		(M)	
Street Address:  Town / Suburb:  Email address:  Phone number:	(H)	(w)	Postcode:		(M)	
Street Address:  Town / Suburb:  Email address:  Phone number:  Secondary contact person	(H) Name:	(W)			(M)	
Street Address:  Town / Suburb:  Email address:  Phone number:  Secondary contact person  Date of ownership change:	(H) Name:		ner:		(M)	
Street Address:  Town / Suburb:  Email address:  Phone number:  Secondary contact person  Date of ownership change:  Previous Owner Name:	(H) Name:	ew Own	ner:		(M)	
Street Address:  Town / Suburb:  Email address:  Phone number:  Secondary contact person  Date of ownership change:  Previous Owner Name:	(H) Name:  Ne	ew Own	ner:		(M)	