

Veterinary Certification of Death

This form must be completed & returned to Greyhound Racing New Zealand (GRNZ) within 3 business days of a Greyhound's death.

GREYHOUND DETAILS:

Name: Microchip:

Earbrand: Date Of Birth:

Colour: Gender:

Has this greyhound ever been registered to race in NZ?

APPLICANT DETAILS:

Person Making Application: Owner Trainer Other:

Please Circle

Full Name:

Home Phone: Mailing Address:

Mobile:

Email:

APPLICANT TO COMPLETE

Note: The greyhound must be presented to a veterinarian as soon as practically possible for examination.
GRNZ has the right to request an autopsy to confirm cause of death.

Please give details below of how this greyhound died: Date of Death:

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VETERINARIAN COMMENTS

(MANDATORY)

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VETERINARIAN DECLARATION

The greyhound identified above, was presented to: (name)

a registered veterinarian, at: (veterinary clinic)

for certification of death on: (date)

(Signed) (Date)

**We love our dogs.
They love to race.**

P 04 589 4900
F 04 589 4907
E greyhound@grnz.co.nz
grnz.co.nz

106-110 Jackson St. Petone.
PO Box 38313, Wellington Mail Centre
5045, New Zealand