

AHC Request Form

AHC Details

Preferred collection date (one date only, not more than 10 days before travel date):	
First EU country that you will enter:	
Document type or Veterinary Practice:	
Service required (Standard / Urgent / Repeat):	

Owner's Details (this person will collect and sign the document & must be travelling with the pets):

Name (First/Last):	
Mobile No.:	
Address:	

Pet 1 Details - please remember that ALL the fields for each pet are required:

Name:	
Colour:	
Breed:	
Microchip No.:	
Sex:	
Species:	
Date of Birth:	

Pet 2 Details:

Name:	
Colour:	
Breed:	
Microchip No.:	
Sex:	

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Species:	
Date of Birth:	

Pet 3 Details:

Name:	
Colour:	
Breed:	
Microchip No.:	
Sex:	
Species:	
Date of Birth:	

Please email your completed Form to: aandr-contact@terravers.co.uk