

APPLICATION NO. _____



Owner's Details

Name: _____

Date of birth: _____ Gender: Male Female

Home Address: _____

Telephone No.: _____ Mobile No.: _____

Email: _____

Pet's Details

Name: _____ Specie: Dog Cat

Date of birth: _____ Gender: Male Female

Breed: _____ Color: _____

Anti-Rabies Vaccination Date: _____

Expiry Date: _____ Name of Vet: _____

Name of Veterinary Clinic: _____

Clinic Address: _____

Telephone No.: _____ Mobile No.: _____

Email: _____

Araneta Center Data Privacy Statement

Araneta Center, Inc., (the "Company"), is committed to protecting the privacy of personal information you may provide us, as we are conscious of our responsibilities as a 'data controller' under Republic Act No. 10173 or the 'Data Privacy Act of 2012'. We believe it is important for you to know how we treat your personal information.

The collected personal information is utilized solely for documentation, evaluation and processing purposes within the Araneta Group and is stored properly with very limited access.

If you do not agree to share your personal information, kindly refrain from filling out the form and return the same. Kindly proceed only when you consent to the collection and processing of your personal information required in this form.

For more information on our Data Privacy Statement, please visit: www.aranetacenter.net

- I have read, understood and agreed to the Araneta Center's Statement of Data Privacy.
 I do not agree to share my personal information at the moment.

I would like to receive updates from Araneta Center. Yes No

I understand and fully agree to take responsibility for any damage or incident caused by my pet within the vicinity of The Araneta Center. If medical expenses arise during the incident, I'm willing to shoulder the said expenses.

Name and Signature

Date