



**CONTRIBUTION FORM**

Donation made in appreciation

or Donation made in memory of: (Pet's name) .....

Breed ..... Age .....

Owner's name .....

Address .....

..... Ph: ( ) .....

I wish to support The NZ Companion Animal Health Foundation and its objective of improving the general health and well-being of our companion animals.

My cheque for \$ ..... is enclosed.

(please make cheque payable to  
The NZ Companion Health Foundation)

*If you wish to pay by Direct Credit, please contact the New Zealand Veterinary Association for account details.*

Please tick if a receipt is required to be sent to the address you have shown above.

I prefer that my donation be used in the following area/s:

Area of greatest need

Canine (dog) problems

Feline (cat) problems

Bird problems

Heart disease investigations

Cancer investigations

Caged pet (Rabbits, Guinea pigs etc)  
problems

Animal behaviour /human-companion bond studies

The information that you supply will be kept in accordance with the provisions of the Privacy Act. It will not be supplied to any other party without your express consent.

Please tick if you do not wish to receive further information from the Foundation.

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**PLEASE POST TO:**

**The NZ Companion Animal Health Foundation**

c/- The New Zealand Veterinary Association

PO Box 11-212

Manners Street

Wellington

Ph: (04) 471 0484

Fax: (04) 471 0494

<http://www.healthypets.org.nz>