



Application for Honorary Registration

Veterinary Practitioner - Honorary Registration Section 22

Individual Details

I, Given Name(s) Surname of
 Address (not PO Box) Please tick which address is below: residential postal*

Suburb/Town State Postcode
Date of Birth Registration Number

confirm that: (tick applicable)

- I have been a member of the profession of veterinary science for not less than 40 years or will be during this registration period.
- I am a member of the profession of veterinary science of long standing and I am of or above the age of 65 years or I will attain the age of 65 years during this registration period.

And I apply for registration as an Honorary Veterinary Practitioner under Section 22 of the Veterinary Practice Act 2003

Declaration

I certify that the information provided on this form is true and correct, and that I am authorised to make this decision.

Signature

Date

* NOTE: Your postal address will appear on the VPB website search database unless we are otherwise notified.