

Subject: Request for Pet Vaccination and Registration

To the [Veterinary Clinic Name / Local Authority Name],

I am writing to formally request a vaccination and registration appointment for my pet. Below are the details regarding the pet and the owner:

Owner Information:

Full Name: [Your Name]

Address: [Your Home Address]

Phone Number: [Your Phone Number]

Email: [Your Email Address]

Pet Information:

Pet's Name: [Pet's Name]

Species: [e.g., Dog, Cat]

Breed: [Pet Breed]

Gender: [Male/Female]

Age: [Pet Age]

Color/Markings: [Description]

Request Details:

Requested Vaccinations: [e.g., Rabies, DHPP, FVRCP]

Registration Type: [New Registration / Renewal]

Preferred Date: [Insert Date]

Preferred Time: [Insert Time]

Please let me know the total fees associated with these services and any documentation I need to bring to the appointment. I have attached the previous medical records if available.

Thank you for your assistance. I look forward to your confirmation.

Sincerely,

[Your Signature]

[Your Printed Name]