



ROTA FORMATION PROJECT EXPRESSION OF INTEREST

I / we are interested in the possibility of becoming involved in a local rota system.

The Practice is (please tick one):

- Food Animal
- Companion Animal
- Equine
- Mixed

The Practice is based in:

(Town) in (County)

Clients are spread over a geographical area of (miles) from the base

The Practice currently has

- (number) Veterinary Practitioners
- (number) Veterinary Nurses
- (number) Other Employees

Signed:

Name: **Vet. No.**

Name of Practice:

Address:

.....

Tel: **Mobile:**

Email:

PLEASE COMPLETE AND RETURN TO VETERINARY IRELAND HQ
13, The Courtyard, Kilcarbery Park, Nangor Road, Dublin 22.
Tel: 01-457 7976 Fax: 01- 457 7998 Email: HQ@vetireland.ie