



2024 Dog License Form

Please return this form along with \$5 for each altered dog to be registered or \$10 for each unaltered dog, and a current rabies certificate for each pet. Thank you!

OWNER(S): _____ Date: _____

Mailing Address: _____

Phone: _____ Phone #2 _____

DOG'S NAME: _____ Male/Female: _____

Breed: _____ Markings/Color: _____

Neutered/Spayed? _____ Veterinarian Name: _____

DOG'S NAME: _____ Male/Female: _____

Breed: _____ Markings/Color: _____

Neutered/Spayed? _____ Veterinarian Name: _____

DOG'S NAME: _____ Male/Female: _____

Breed: _____ Markings/Color: _____

Neutered/Spayed? _____ Veterinarian Name: _____

For office use only:

Registration fee paid \$_____ / Does this include delinquency fees? _____

Date received ____/____/2024

Date Tag(s) and Certificate(s) mailed to owner ____/____/2024

Signed: _____