

VILLAGE OF THERESA

DOG REGISTRATION APPLICATION

Owner Name _____ Phone # _____

Physical Address _____ Theresa WI 53091

Mailing Address _____ Theresa WI 53091

Email _____

Dog Name _____ Breed _____

Color _____ Rabies Expiration _____

Vet Clinic _____ Rabies Tag # _____

Circle One: Spayed Female, \$10 Female, \$15

Neutered Male, \$10 Male, \$15

**If applying after March 31, please include a \$25 late fee unless
you or your dog are new to the Village.**

Village of Theresa

PO Box 327

Theresa, WI 53091

OR

**Please mail or put this form and payment (check or exact cash) in the "Village of Theresa Drop Box"
at the parking lot exit of 292 Mayville Street**

**Rabies form, registration, and pet tag will be
processed and mailed to the pet owner.**