Town of Arena Dog License Application

Owner's Name:	
Address:	
Phone: Email:	
Dog's Name:	
Dog's DOB:	
Dog's Breed:	
Veterinarian Used:	
Veterinarian Town:	
Veterinarian Phone:	
Last Rabies Vaccine Given:	_
Additional Dog Information can be written on the other side of this page	
Please complete this form and return with a copy of vaccination proof from your Vet. You can put in the drop box at the town hall or mail to Treasurer, PO Box 126, Arena, WI 53503 with the annual fee.	
\$10 for spayed or neutered dog	

\$15 for intact dog