



Tag #: \_\_\_\_\_

Date: \_\_\_\_\_

## DOG or CAT LICENCE

### Owner's information

Name: \_\_\_\_\_

Street address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

Phone (1) :( \_\_\_\_\_ ) \_\_\_\_\_

Phone (2) :( \_\_\_\_\_ ) \_\_\_\_\_

Emergency contact: \_\_\_\_\_

Emergency Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

### Pet information

Name: \_\_\_\_\_

Breed: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

Tattoo/chip: \_\_\_\_\_

Circle:            Male            Female

Circle:            Altered            Unaltered

DOB: \_\_\_\_\_  
(DD/MON/YEAR)



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