

Dog License / Renewal Form

| PERSONAL INFORMATION | | | |
|--|--|--|---|
| Last Name: | | First Name: | |
| Home Phone: | | Work Phone: Cell Phone: | |
| Civic Address: | | Postal Box No. | |
| E-mail Address: | | | |
| PET INFORMATION (1) | | | |
| Breed: | | Color: | Sex: <input type="checkbox"/> M <input type="checkbox"/> F |
| Pet's Name: | | Neutered/Spayed: <input type="checkbox"/> Yes <input type="checkbox"/> No | Fee: Tag #: |
| PET INFORMATION (2) | | | |
| Breed: | | Color: | Sex: <input type="checkbox"/> M <input type="checkbox"/> F |
| Pet's Name: | | Neutered/Spayed: <input type="checkbox"/> Yes <input type="checkbox"/> No | Fee: Tag #: |
| PET INFORMATION (3) - OVER LIMIT APPROVAL REQUIRED | | | |
| Breed: | | Color: | Sex: <input type="checkbox"/> M <input type="checkbox"/> F |
| Pet's Name: | | Neutered/Spayed: <input type="checkbox"/> Yes <input type="checkbox"/> No | Fee: Tag #: |

| AUTHORIZATION: |
|--|
| <p>I certify that the information given on this form is true and complete to the best of my knowledge and acknowledge my authorization of the information.</p> <p>_____</p> <p>Signature</p> |