

# Dog License

## OWNER INFO:

NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

MAILING AND PHYSICAL  
ADDRESS: \_\_\_\_\_

## PET INFO:

NAME: \_\_\_\_\_

SEX: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

BREED: \_\_\_\_\_

COLOR: \_\_\_\_\_

MARKINGS: \_\_\_\_\_

WEIGHT: \_\_\_\_\_

SPAYED OR NEUTERED: YES NO

VETERINARIAN: \_\_\_\_\_

RABIES# EFFECTIVE START:

EFFECTIVE END: \_\_\_\_\_

PLEASE PROVIDE A COPY OF THE SHOT RECORD FOR FILES.

LICENSE FEE \$10.00

MUST HAVE PROOF FROM VET