

**DOG LICENSE INFORMATION**

***\*THIS FORM MUST BE ACCOMPANIED BY COPY OF RABIES CERTIFICATE***

Male or Female - \$12.00 each (5 months of age or older)

Neutered Male or Spayed Female - \$5.00 each (5 months of age or older)

**OWNER'S NAME:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DOG'S NAME:** \_\_\_\_\_

**SEX (Circle One)**      **Female Male**                      **Spayed Female**      **Neutered Male**

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

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

**VACCINATION INFORMATION**

(This information may be obtained by calling your veterinarian – ask for Rabies Certificate)

**RABIES VACCINATION DATE:** \_\_\_\_\_

**VACCINE MANUFACTURE:** \_\_\_\_\_

**SERIAL NUMBER:** \_\_\_\_\_

**EXPIRATION DATE OF VACCINATIONS:** \_\_\_\_\_

*If you have more than one dog, please list others below or on reverse side. Thank you!*

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