

# DOG LICENCE

**Account: #** \_\_\_\_\_ **Tag: #** \_\_\_\_\_

**Owner's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Contact Information: Ph:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Other:** \_\_\_\_\_

Dog's Name:	2 <sup>nd</sup> Dog's Name
Sex: Please circle	Sex: Please circle
Female                  Female Spayed Male                      Male Neutered	Female                  Female Spayed Male                      Male Neutered
Breed:	Breed:
Color:	Color:

Only complete the bottom portion if your dog is SPAYED or NEUTERED.

I, \_\_\_\_\_  
(print full name) certify that I am the owner of the dog

described on the licence application and further that this dog has been spayed or neutered as indicated. Please sign here: \_\_\_\_\_