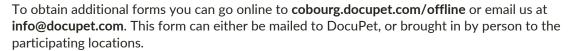
Dog Licence Form





Address & Contact Information

First Name*		Last Name*								
Email Address (required for o		DOE			DOB (M	M/DD/YYYY)				
Street Number*	Street Name*									
Unit or Apartment	Postal Code*	¢	Telephone	*	Cellphone			one		
Dog Information	1									
Dog's Name*					Dog's Breed*				Dog's DOB (YYYY/MM/DD)	
Gender*		Spayed/Neutered*		Microchipped*	_		vide microchip number		I	
○ Male ○ Female		○ Yes ○ No		○ Yes	○ No					
Colour*		Veterinary Clinic			Tag Type* ○ Small (22.5mm x 25mm) ○ Large (30mm x 33.2mm)					
Licence Type										
○ Spayed/Neutered Dog - 1 Year \$25.00										
Additional Dog										
Dog's Name*			Dog's Breed*	k			Dog's DOB (YYYY/MM/DD)			
Gender*		Spayed/Neutered* Microchipped*			If yes, provide microchip number					
○ Male ○ Female		○ Yes ○ No		○ Yes	○ No	No				
Colour*		Veterinary Clinic			Tag Type* ○ Small (22.5mm x 25mm) ○ Large (30mm x 33.2mm)					
Licence Type										
○ Spayed/Neutere		○ Intact Dog - 1 Year \$50.00								
Payment _*										
Payment Type by Mail					Payment Type in Person					
○ Cheque ○ Visa ○ MasterCard					○ Cash ○ Debit ○ VISA ○ MasterCard					
Credit Card Holder Name		Credit Car					Expiry Date			
○ I verify that my pet's information contained within this					Signature _*					
form is correct and my pet's vaccines are up to date.										
○ I acknowledge that I am only registering a third dog if I										
meet the requiren										
municipal bylaw f	~. 0									
1 /					l	S	um Receive	<u>.</u>		
		9	\$							

Where do I mail this form?

DocuPet 2 Gore St Kingston ON K7L 2L1 Who do I make a cheque out to?

Please make cheques payable to DocuPet