## **Dog Registration Form**



Town of Vinalhaven PO Box 815 Vinalhaven, ME 04863

## **Owner Information (please print or type)**

Name	
Billing address	
Location	
Phone	
Dog Information	
Name	
Date of Birth	
Sex/Spayed or Neutered	
Breed & Color Description	
Veterinarian	

## **Payment information**

Spayed/Neutered fee: **\$6** Male/Female fee: **\$11** 

After January 31<sup>st</sup>, an additional \$25 late fee shall be added.

□Check enclosed	$\Box$ Spayed / Neutered	$\Box$ Unaltered Male ,	/ Female
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## Please include a copy of the current rabies certificate!

If we do not have a rabies certificate on file, we **cannot** process the registration.

Please make checks payable to:

Town of Vinalhaven PO Box 815 Vinalhaven, ME 04863