2017 DOG LICENSE
Please Complete All Information

Owner Name: _____

Address: _____

_____

Phone: _____

Dogs Name: _____

Sex : Male Female **Dog Size:** Small Medium Large

Breed of Dog: _____

Hair Type: Short Long **Color:** _____

Dogs Date of Birth: _____/_____/_____

Spayed or Neutered: _____ yes _____ date

_____no

Rabies Expiration: _____(***include copy of certificate)***

Rabies must be current and good through October 31, 2017.

Fee: $10. 00 per dog - spayed/neutered

$13.00 per dog - non spayed/unneutered

cash _____ check # _____

REMINDER:

Dogs registered after FEBRUARY 28th, 2017 will be charged a $10.00 late fee.

MAIL TO:
ELK TOWNSHIP
DOG REGISTRATION
680 WHIG LANE
MONROEVILLE, NJ 08343

PLEASE INCLUDE A SELF ADDRESSED, STAMPED ENVELOPE AND THE DOG LICENSE AND TAG WILL BE MAILED TO YOU.

Thank You.