

City of Menno

Dog Registration

Expires: 12/31/24

License # _____

Issue Date _____ Fee Received \$ _____

NEW _____ RENEWAL _____

Owner Phone Number _____

Owner Name _____

Address _____

Name of Dog: _____

Sex: Male _____ Female _____ Neutered _____

Date of Birth: _____ Age: _____

Breed/Color/Special Markings: _____

Rabies Tag Number: _____ Expiration Date of Rabies Tag: _____

Yes ___ No ___ Rabies Certificate Info (must contain the following): name/address of licensed vet, description/name of dog on certificate, type of vaccine used, date of vaccination, expiration of immunization, serial number of vaccine.

(Antirabic vaccination within 3 months preceding the date on which the animal is licensed or prior vaccination within 2 years shall be deemed vaccination sufficient to permit the issuance of the license required. A veterinarian's certificate to that effect shall be in compliance with this section.)

I hereby acknowledge that the above information is correct on this date. I will abide by the regulations set forth in Ordinance No. 2013-5 and also sign this document in which I have received these documents. I furthermore agree to securely fasten the license tag to the dog so registered.

I agree to pay the City of Menno the sum of \$10.00, the amount due for each dog over six months of age for new pet, \$5.00 for renewal. I agree that payment of this fee entitles me to keep this animal without further payment until the renewal date on or before December 31, 2024.

Animal Owner

Date