

PET TAG REGISTRATION

CLERK-TREASURER'S OFFICE

RECEIPT NUMBER

FOR INTERNAL USE

Date : Town Tag # :
Rabies Tag # : Expiration Date :

PET'S INFORMATION

Pet's Name : Pet Type : Dog Cat
Age : Breed :
Color(s) : Sex : Male Female
Spayed (female) : Yes No Neutered (male) : Yes No

OWNER'S INFORMATION

Owner's Name :
Street Address :
City : Zip Code :
Home # : Cell # :
E-Mail :

VETERINARIAN INFORMATION

Facility Name :
Phone # : Microchip # :

**All Pet Tags are due by March 31st of each year.
Please submit current rabies information.**