

Dog Registration Form
Town of Prairie du Sac

Form Must Be Fill Out Completely, Incomplete Forms Will Be Returned

Your Name: _____ Address: _____

	<u>Dog 1</u>	<u>Dog 2</u>	<u>Dog 3</u>	<u>Dog 4</u>
Name of Dog:	_____	_____	_____	_____
Sex:	_____	_____	_____	_____
	M (Male) F (Female) NM (Neutered Male) SF (Spayed Female) All Dogs are \$15.00 each			
Color:	_____	_____	_____	_____
Breed:	_____	_____	_____	_____
Rabies Vaccination:				
Date	_____	_____	_____	_____
Vaccine Mfg.	_____	_____	_____	_____
Vaccine Serial No.	_____	_____	_____	_____
	_____	_____	_____	_____

If mailing dog registration separately from tax payment, please include postage paid self addressed return envelope