

The Corporation of the City of Elliot Lake

**DOG / CAT**

**2020**

(Please Circle One)

**REGISTRATION FORM**

( For Office Use )

LICENSE FEE \$ \_\_\_\_\_

TAG # \_\_\_\_\_

ISSUED \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
D / M / Y

HST \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

**OWNER INFORMATION:**

**(PLEASE PRINT)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Street: \_\_\_\_\_ Unit # \_\_\_\_\_

P.Code: P5A City: Elliot Lake Prov: ON Phone: (705) - \_\_\_\_\_

**NEW ADDRESS FROM LAST YEAR?**

Yes / No  
(Please Circle One)

**NOTE** - If this address is new, please provide the old address on reverse.

**PET INFORMATION:**

**RENEWAL FROM LAST YEAR:**

YES \_\_\_\_\_ NO \_\_\_\_\_

Name of Pet: \_\_\_\_\_ Breed: \_\_\_\_\_

Colour/Markings: \_\_\_\_\_

Sex: Male \_\_\_\_\_; Neutered \_\_\_\_\_; Female \_\_\_\_\_; Spayed \_\_\_\_\_; Age: \_\_\_\_\_

**Rabies Protection:** Yes \_\_\_\_\_; No \_\_\_\_\_; Rabies Tag # \_\_\_\_\_

Date of Inoculation: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Veterinarian: \_\_\_\_\_  
D M Y

**\*\* TOTAL NUMBER OF PETS IN HOUSEHOLD\*\*** : Dogs \_\_\_\_\_ Cats \_\_\_\_\_

Please complete the following (if this application is for a dog), to identify if the animal **is** or **is not** a "pit bull" described as one of the following:

YES NO

(a) a pit bull terrier

(b) a Staffordshire bull terrier

(c) an American Staffordshire terrier

(d) an American pit bull terrier

(e) a dog that has an appearance and physical characteristics that are substantially similar to those of dogs referred to in any of clauses (a) to (d); ("pit-bull")

I hereby certify that the above information is true and correct, and by signing below, give authorization to The Corporation of the City of Elliot Lake to confirm the information hereon.

Signature of Owner \_\_\_\_\_

Accepted By: \_\_\_\_\_

(Print Employee / Volunteer Name)