



# City of Denton Animal Registration Form

Vet – supplied Rabies certificate must be presented/attached as proof of vaccination.

## Owner Information

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Address \_\_\_\_\_ Apt.# \_\_\_\_\_

City / State \_\_\_\_\_

Zip \_\_\_\_\_

Phone \_\_\_\_\_ Alt Phone \_\_\_\_\_

Email \_\_\_\_\_

## Animal Information

Animal Name \_\_\_\_\_ Age \_\_\_\_\_

Species  Canine  Feline Breed \_\_\_\_\_ Color \_\_\_\_\_

Sex  Male  Female Altered  Spay  Neutered  Unaltered

Size/Weight  Under 20lbs  20 – 50lbs  over 50lbs

Microchip # \_\_\_\_\_

## Veterinarian Information

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Vaccination Date \_\_\_\_\_

### STAFF ONLY

Registration Tag Number

\_\_\_\_\_

Effective Date:

\_\_\_\_\_