

ELK TOWNSHIP DOG LICENSE

Please Complete All Information

Owner Name: _____ **Phone:** _____

Address: _____

Dog Information

Name: _____

Sex : Male Female **Dog Size:** Small Medium Large

Breed of Dog: _____

Hair Type: Short Long **Color:** _____

Dogs Date of Birth: _____/_____/_____

Spayed or Neutered: _____ yes _____ date

_____no

Rabies Expiration: _____ *(include copy of certificate)*
Rabies must be current and good through October 31 of current year.

FREE RABIES VACCINE CLINIC – First Saturday in February 10am to 12pm
ELK TOWNSHIP PUBLIC WORKS GARAGE

Fee: \$10. 00 per dog - spayed/neutered

\$13.00 per dog - non spayed/unneutered

cash _____ **check #** _____

REMINDER:

Dogs registered after FEBRUARY 28th of each year will be charged a \$10.00 late fee.

**MAIL TO:
ELK TOWNSHIP
DOG REGISTRATION
680 WHIG LANE
MONROEVILLE, NJ 08343**

**PLEASE INCLUDE A SELF ADDRESSED, STAMPED ENVELOPE AND THE
DOG LICENSE AND TAG WILL BE MAILED TO YOU.**

Thank You.