



TOWN OF WADENA Pet Licence Application

Pet Owner's Name: _____ Email: _____

Mailing Address: _____ Civic Address: _____

All Contact Numbers: _____

	Name	Male Or Female	Breed	Age (as of today's date)	Description	Spayed Or Neutered Y/N	Micro-Chipped Y/N	Rabies Vaccine Y/N	Licence #	Fee \$
DOG or CAT										
DOG or CAT										
DOG or CAT										
DOG or CAT										

Breakdown of Fees:

Micro-chipped	Spayed or Neutered	Annual License Fee
x	x	\$60
√	x	\$35
x	√	\$15
√	√	\$10

Date

Pet Owner's Signature

Annual Renewal:

Date	Fee	Receipt #	Valid Until	Pet Owner's Signature	Town of Wadena Staff Initials
			December 31, _____	<i>See previous page</i>	
			December 31, _____		
			December 31, _____		
			December 31, _____		
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			December 31, _____		
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