



# PET REGISTRATION FORM

To receive a tag one must supply the city with:

- 1.) Registration Form 2.) Proof of Rabies Vaccine 3.) Payment 4.) Photo of Animal

**TAG COSTS:** Spayed/Neutered = \$5 NOT spayed/neutered = \$10

**OWNER'S NAME\***

**ADDRESS\***

**PHONE\***

**EMAIL\***

*animal name*  
\_\_\_\_\_

*animal age* \_\_\_\_\_  Male  Female  Spayed/Neutered

Dog  Cat *animal breed* \_\_\_\_\_

*additional info/description*  
\_\_\_\_\_  Chipped  
\_\_\_\_\_  Rabies Vac.

Office Use Only

Picture  Proof of Vaccination

TAG #: \_\_\_\_\_ Paid: \_\_\_\_\_ Date: \_\_\_\_\_

*animal name*  
\_\_\_\_\_

*animal age* \_\_\_\_\_  Male  Female  Spayed/Neutered

Dog  Cat *animal breed* \_\_\_\_\_

*additional info/description*  
\_\_\_\_\_  Chipped  
\_\_\_\_\_  Rabies Vac.

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TAG #: \_\_\_\_\_ Paid: \_\_\_\_\_ Date: \_\_\_\_\_

*animal name*  
\_\_\_\_\_

*animal age* \_\_\_\_\_  Male  Female  Spayed/Neutered

Dog  Cat *animal breed* \_\_\_\_\_

*additional info/description*  
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*animal name*  
\_\_\_\_\_

*animal age* \_\_\_\_\_  Male  Female  Spayed/Neutered

Dog  Cat *animal breed* \_\_\_\_\_

*additional info/description*  
\_\_\_\_\_  Chipped  
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TAG #: \_\_\_\_\_ Paid: \_\_\_\_\_ Date: \_\_\_\_\_

Registration Forms can be emailed to [cityclerk@whitewaterks.gov](mailto:cityclerk@whitewaterks.gov), placed in the drop box at the office building or come in person.