



# Town of Coulee Dam

## Pet Registration Form

**2025**

Tag # CD-\_\_\_\_\_

Tag Color: **RED DOG BONE**

Date Issued \_\_\_\_\_

Owners Name \_\_\_\_\_  
Last Name First Name

Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Pet Type: \_\_\_\_Dog \_\_\_\_Cat Sex: \_\_\_\_Male \_\_\_\_Female

Pet Name: \_\_\_\_\_ Age: \_\_\_\_\_

Veterinarian: \_\_\_\_\_ Weight: \_\_\_\_\_

Breed: \_\_\_\_\_

Colors/Marks \_\_\_\_\_

Spayed/Neutered: \_\_\_\_\_Yes \_\_\_\_\_No

### Shots Issued

Distemper: \_\_\_\_Yes \_\_\_\_No

Rabies: \_\_\_\_Yes \_\_\_\_No

Parvo Virus: \_\_\_\_Yes \_\_\_\_No

Leukemia: \_\_\_\_Yes \_\_\_\_No

Additional Information If Any:

\_\_\_\_\_  
\_\_\_\_\_

Signature

\_\_\_\_\_

For Office Use:

Amount Due: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Issued by: \_\_\_\_\_