Email: Lclemens@cityofdonnelly.org

DOG REGISTRATION FORM

208-325-8859, Fax 208-325-4091



Owner/Applicant:				
Mailing Address:				
Physical Address:				
Phone #:				
Cell #:				
E-Mail Address:				
Donnelly City Code – Title 6, Ch. 6.05.010: All dogs of more the <u>NOT</u> Neutered/Spayed - \$15.00. If you have more than three a Kennel License is \$20, renewable yearly in addition to the d	nan six months of age, must be licen e dogs, a Kennel License is required (•	•	
#1 DOG INFORMATION:		TAG NUMBER:		
Name of dog:	Age:	Male:	Female:	
Breed:	Neutered/Spayed:	Yes:	No:	
Brief description of dog:				
#2		TAC NUINADE	·D.	
DOG INFORMATION:		TAG NUMBER:		
Name of dog:	Age:	Male:	Female:	
Breed:	Neutered/Spayed:	Yes:	No:	
Brief description of dog:				
#3				
DOG INFORMATION:		TAG NUMBER:		
Name of dog:	Age:	Male:	Female:	
Breed:	Neutered/Spayed:	Yes:	No:	
Brief description of dog:				
I give the City of Donnelly Permission to obtain the vac	• • • • • • • • • • • • • • • • • • • •			
Veterinarian Name & City:OWNER/APPLICANT:				
•				
PRINT NAME:				