# Dog Licence Form

To obtain additional forms you can go online to **clearview.docupet.com/offline** or email us at **info@docupet.com**

CLEARVIEW

## *Contact Information*

| First Name* | Last Name* |
|---|---|
| Email Address (required for online account) | |
| Telephone* | Cellphone |

## *Mailing Address*‡

| Street Number* | Street Name* | Unit or Apartment | City | Postal Code* |
|---|---|---|---|---|
| | | | | |

‡Note that if your mailing address is not the the physical address for your pet, you must complete the Physical Address section below.

## *Physical Address*

| Street Number* | Street Name* | Unit or Apartment | City | Postal Code* |
|---|---|---|---|---|
| | | | | |

## *Dog Information*

| Dog's Name* | | | Dog's Breed* | Dog's DOB (YYYY/MM/DD) |
|---|---|---|---|---|
| Gender*<br>◯ Male ◯ Female | Spayed/Neutered*<br>◯ Yes ◯ No | Microchipped*<br>◯ Yes ◯ No | If yes, provide microchip number | |
| Colour* | Veterinary Clinic | | Tag Type*<br>◯ Small (22.5mm x 25mm) ◯ Large (30mm x 33.2mm) | |
| Licence Type<br>◯ Spayed/Neutered Dog $26.00 | | | ◯ Intact Dog $32.00 | |

## *Additional Dog*

| Dog's Name* | | | Dog's Breed* | Dog's DOB (YYYY/MM/DD) |
|---|---|---|---|---|
| Gender*<br>◯ Male ◯ Female | Spayed/Neutered*<br>◯ Yes ◯ No | Microchipped*<br>◯ Yes ◯ No | If yes, provide microchip number | |
| Colour* | Veterinary Clinic | | Tag Type*<br>◯ Small (22.5mm x 25mm) ◯ Large (30mm x 33.2mm) | |
| Licence Type<br>◯ Spayed/Neutered Dog $26.00 | | | ◯ Intact Dog $32.00 | |

## *Payment & Donation**

| Yes! I want to help more pets in my community find a safe and happy home. I want to make a donation of<br>◯ $5 ◯ $10 ◯ $25 ◯ $50 | Sum Received*<br>$ |
|---|---|
| Payment Type<br>◯ Cash ◯ Cheque ◯ Mastercard ◯ VISA | |

| Credit Card Holder Name | Credit Card Number | CVC | Expiry Date (YYYY/MM) |
|---|---|---|---|
| | | | |

**Who do I make a cheque out to?**
Please make cheques payable to DocuPet.

**Where do I mail this form?**
DocuPet
2 Gore St
Kingston ON K7L 2L1