

2021 CITY OF AVOCA - DOG/CAT TAG APPLICATION

Owner Information (Please Print & Fill out completely)			Veterinarian Information		
Full Name			Clinic name and address:		
Address		Apt #			
City	State	ZIP			
IMPORTANT: The following will be used to contact you if your pet is found			Verification of Spayed/Neutered Pet		
Home Phone		Cell Phone	I, _____, (print veterinarian's name)		
Email Address			verify that the pets listed below as sterilized are, in fact, spayed or neutered.		
Affirmation of Owner: Each pet listed below has a current rabies inoculation according to state law. Please enter the rabies tag number in the appropriate box below.			Vet or City Employee may verify (please refer to Vaccination Sheet from Veterinarian's Office).		
Signature of Owner		Date	City Employee		Date

Pet Information

Pet Name	Breed	Color(s)	Species	Gender	Sterile	Fertile	Rabies Tag #	Vacc. Expires	City Tag #
			Dog/Cat	M/F	\$17.00	\$23.00			
			Dog/Cat	M/F	\$17.00	\$23.00			
			Dog/Cat	M/F	\$17.00	\$23.00			
Please make check payable to:					\$ _____	\$ _____			
"City of Avoca"					Sterile + Fertile		= Total Paid: \$ _____		

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