

## **Dog License Application for New Dog**

Name of Owner	
Address	
Telephone #	
Email Address	
Dog's Name	
Breed	
Age	
Color/Markings	
Sex	
(Male or Female)	
Spayed/Neutered Yes or No	

## Fees:

\$ 8.00	Spay / Neutered	]
\$19.00	Unaltered	

License period is July 1<sup>st</sup> through June 30<sup>th</sup> each year Licenses must be **renewed** each year prior to July 1<sup>st</sup>

Make Check Payable to: "Town of Stratford." Mail to the address at the top of this form

## Please Include the following with your payment:

- Current Rabies Certificate Showing Expiration Date
- Spay or Neutered Certificate from Veterinarian
- Self Addressed Stamped Envelope
- Completed Application

All paperwork will be returned to you.

Please call if you have any questions: 203-385-4020