## **Pet Registration Form**

Once complete, mail completed form to:

Animal Control Officer 4950 Keller Springs #155 Addison, TX 75001 972.450.2845





TOWN OF ADDISON USE ONLY	
Tag Number:	
Date:	

## **ANIMAL REGISTRATION FORM**

Remember to register your animal yearly!

Owner's Name:
Phone Number:
Address:
Name of Veterinarian Clinic:
Veterinarian Clinic Phone Number:
ABOUT YOUR ANIMAL
Rabies Vaccination Date (MM/DD/YYYY): 1 Year Vaccine or 3 Year Vaccine
ls your animal:   Male Female
Is your animal spayed or neutered?
Is your animal microchipped?   Yes or  No If yes, what is the #:
Please describe your animal (name, breed, size, color, identifying marks, etc.):
Please print off and mail in (or make an appointment to stop by in person) :
☐ This form
A copy of your animal's rabies vaccination certificate (available from your veterinarian clinic)
\$3.00 check (animal is spayed/neutered) or \$5.00 check (animal is unaltered). Made payable to Town of Addison
Mail to: In Person by appointment only:

Mail to: Addison Animal Control Pet Registration 4950 Keller Springs #155 Addison, TX 75001 In Person by appointment only: Addison Animal Control 972-450-2845 4950 Keller Springs #155 Addison, TX 75001