



**DOG/CAT LICENCE
TOWN OF BEAVERLODGE**

Office Use:

Tag Number: _____

Cat ☐ Dog ☐

Male ☐ Female ☐
Yes ☐ No ☐

Roll Number _____

Pet Name _____

Pet Type _____

Pet Breed _____

Pet Colours _____

Pattern(s) _____

Birth Year _____

Sex

Fixed?

Microchip? ID: _____

Tattoo? ID: _____

Service Pet?

Senior Owner?

Yes ☐ No ☐
Yes ☐ No ☐

Owner First Name _____

Owner Email _____

Emergency Contact _____

Emergency Email _____

Last Name _____

Civic Address _____

Mailing Address _____

Beaverlodge, AB T0H 0C0



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