

## **TOWN CLERK'S OFFICE**

TOWN OF MONTAGUE One Avenue A Turners Falls, MA 01376 413-863-3200 Ext. 203

## Kathern F. Pierce Town Clerk

Tina M. Sulda Asst. Town Clerk

## **DOG LICENSE NEW / RENEWAL**

\*A license will only be provided when a proof of rabies vaccination and proof of spaying and/or neutering from your veterinarian is provided with this form\*

Your forms will be returned.

## **Dog Owner Information:**

Name:		
Address:		
Mailing Address:		
Telephone:		
Veterinarian:		
	<b>Dog Information:</b>	
Name:		-
Non Altered Male:	Non Altered Female:	(\$10.00)
Neutered Male:	Spayed Female:	(\$5.00)
Breed:		
<u>Color:</u>		
Rabies Vaccination:		
Date of Birth:		-
Neutered/Spayed I Non Altered Dogs	E	
Please provide Vet proof of spay or ne	erinarian papers with expiration of rabies valuering.	accination and
Mail your corresponder Town Clerk 1 Avenue A	ndence to:	
Turners Falls, MA	01376	