## **Pet Licence Form**

info@aurora.docupet.com.



To obtain additional forms you can go online to **aurora.docupet.com/aurora/offline** or email us at **info@aurora.docupet.com**. This form can either be mailed to the Town of Aurora or brought in by person to the participating locations.

## Address & Contact Information

First Name		Last Name								
Email Address (required for					Date of Birth (YYYY/MM/DD)					
Street Number	Street Name and City									
Unit or Apartment	Postal Code		Telephone	Telephone			Cellphone			
Pet Information										
Pet's Name		Pet	Pet Breed					Colour		
Pet Date of Birth (YYYY/MM/DD)		Rabies Expiration Date (YYYY/MM/E		DD)	Gender  Male		○ Fem	) Female		
Spayed/Neutered  Yes No		Microchipped  Yes No			If yes, provide microchip					
Veterinary Clinic		Tag Type  Small (22.5mm x 25m			mm x 25mm	m)				
Licence Type  O Dog Licence -	1 Year \$35.50 ○ Sen Year \$2		g Licence - 1	○ Cat Li	icence -	1 Year \$23.7		Senior Rate: Cat r \$17.00	: Licence - 1	
Additional Pet	or older to qualify for senior citi		Breed				Colou	ır		
Pet Date of Birth (YYYY/MM/DD)		Rabies Expiration Date (YYYY/MM/DD)			Gender  Male Female					
Spayed/Neutered		Microchipped		If yes, provide microchi						
Veterinary Clinic	○ Yes	Tag Type			II (22.5mm x 25mm)					
Licence Type  O Dog Licence -	1 Year \$35.50	ior Rate: Dog 5.00	g Licence - 1			1 Year \$23.7	5 ():	Senior Rate: Cat r \$17.00		
*Pet owners must be 55  Payment	or older to qualify for senior citi	zen rates.								
Payment Type by Mail					Payment T	ype in Person				
○ Cheque (ALL NSF CHEQUES ARE SUBJECT TO A \$37.00 ADMINIS						sh O Debit	○ Che	eque		
I acknowledge that the foregoing application may contain "personal information" as de the Municipal Freedom of Information and Protection of Privacy Act, and that such information pursuant to the provisions of the Municipal Act and will be utilized by the Towadministration of this licence. In the event my pet is lost, I hereby authorize the Town or release my "personal information" in order that I may be contacted directly regarding the form of my pet. On approval and payment of the fee this application becomes a licence.				ormation is on for f Aurora to	Who	sum Received \$ ere do I mail thi The Town of 100 John We Bo Aurora ON I Re: Pet Li	f Aurora est Way ox 1000 L4G 6J1		te a cheque out to? Fown of Aurora	
Should you require further information, please contact The Town of Aurora at 905-727-1375 email bylawdept@aurora.ca or contact DocuPet at $1-855-249-1370$ or email					Pet Owne	r Signature:		Date:		