



# City of Garden Ridge

*"A way of life, not just a place to live"*

## ANIMAL SERVICES Pet License Registration

Owners Name \_\_\_\_\_ Date \_\_\_\_\_

Address (complete) \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

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NAME OF ANIMAL \_\_\_\_\_  MALE  FEMALE  
 DOG  CAT BREED \_\_\_\_\_  NEUTERED  SPAYED  
COLORS / MARKINGS \_\_\_\_\_ MICROCHIP# \_\_\_\_\_

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NAME OF ANIMAL \_\_\_\_\_  MALE  FEMALE  
 DOG  CAT BREED \_\_\_\_\_  NEUTERED  SPAYED  
COLORS / MARKINGS \_\_\_\_\_ MICROCHIP# \_\_\_\_\_

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NAME OF ANIMAL \_\_\_\_\_  MALE  FEMALE  
 DOG  CAT BREED \_\_\_\_\_  NEUTERED  SPAYED  
COLORS / MARKINGS \_\_\_\_\_ MICROCHIP# \_\_\_\_\_

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NAME OF ANIMAL \_\_\_\_\_  MALE  FEMALE  
 DOG  CAT BREED \_\_\_\_\_  NEUTERED  SPAYED  
COLORS / MARKINGS \_\_\_\_\_ MICROCHIP# \_\_\_\_\_

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Please include a \$10.00 registration fee for each animal, with proof of current rabies certificate, and make checks payable to the City of Garden Ridge. Send this form, proof of rabies vaccination and your check to City of Garden Ridge, 9400 Municipal Parkway, Garden Ridge, TX 78266.

**RECEIPT AND REGISTRATION TAGS WILL BE MAILED BACK TO YOU.**

(Attach additional sheets if necessary.)