

REQUEST FOR DOG LICENSE

NAME: _____ PHONE#: _____

ADDRESS: _____

CITY, ZIP: _____

Dog's Name: _____ Color: _____

Breed: _____ Sex: _____

Unspayed/Unneutered (fee \$12) Spayed/Neutered (fee \$6)

If sent after April 1 add \$5.00 for each dog licensed (unless this is a puppy being licensed for the 1st time).

Send **current rabies vaccination certificate** – not a receipt – and proper fee to:

Liza Schroeder, Treasurer
Town of Prairie Lake
796 21st St.
Chetek WI 54728

Vaccination certificate will be returned with the license certificate(s) and tag(s).

Make check payable to: Town of Prairie Lake in the correct amount.