

# Madera Pet License Form

To obtain additional forms you can go online to [maderacounty.docupet.com/madera/offline](http://maderacounty.docupet.com/madera/offline) or email us at [info@docupet.com](mailto:info@docupet.com)



## Contact Information

First Name*	Last Name*	
Email Address (required for online account)		
DOB (MM/DD/YYYY)*	Telephone*	Cellphone

## Secondary Contact Information

First Name*	Last Name*
Email Address	
Telephone*	Cellphone

## Mailing Address<sup>†</sup>

Street Number*	Street Name*	Unit or Apartment	Zip Code*
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<sup>†</sup>Note that if your mailing address is not the the physical address for your pet, you must complete the Physical Address section below.

## Physical Address

Street Number*	Street Name*	Unit or Apartment	Zip Code*
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## Pet Information

Pet's Name*	Pet's Breed*	Pet's DOB (MM/DD/YYYY)	
Gender* <input type="radio"/> Male <input type="radio"/> Female	Spayed/Neutered* <input type="radio"/> Yes <input type="radio"/> No	Microchipped* <input type="radio"/> Yes <input type="radio"/> No	If yes, provide microchip number
Color*	Veterinary Clinic	Tag Type* <input type="radio"/> Small (0.86 inches) <input type="radio"/> Large (1.25 inches)	
License Type <input type="radio"/> Spayed/Neutered Dog- One Year \$10.00 <input type="radio"/> Intact Dog- One Year \$50.00 <input type="radio"/> Spayed/Neutered Dog- Senior One Year \$5.00 <input type="radio"/> Intact Dog- Senior One Year \$50.00 <input type="radio"/> Spayed/Neutered Cat- One Year \$5.00 <input type="radio"/> Intact Cat- One Year \$25.00			

\*Pet owners must be 65 or older to qualify for senior citizen rates.

## Payment & Donation\*

Yes! I want to help more pets in my community find a safe and happy home. I want to make a donation of <input type="radio"/> \$10 <input type="radio"/> \$20 <input type="radio"/> \$50	Sum Received*
Payment Type (If paying for your license(s) by credit card, your order will be subject to a processing fee of 2.9% of the total order, plus \$0.30.) <input type="radio"/> Check	\$

### Who do I make a check out to?

Please make checks payable to DocuPet. Note that your check must clear prior to your membership package being mailed.

### Proof of rabies vaccination

Please include the required copy of your pet's rabies certificate. Note that it will not be mailed back to you.

If your pet is newly spayed/neutered, please include proof.

### Where do I mail this form?

DocuPet  
15 Technology Pl  
Suite 1  
East Syracuse NY 13057