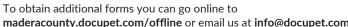
Madera County Animal Services Pet License Form





maderacounty.docupet.com/offline or email us at info@docupet.com

Contact In	formation							
First Name*				Last Name*				
Email Address (req	uired for online account)							
DOB (MM/DD/YYYY)*		Telephone*	Telephone*		Cellphone			
Secondary	Contact Info	rmation						
First Name*				Last Name*				
Email Address								
Telephone*				Cellphone				
Mailing Ad	ldress [‡]							
Street Number*	Street Name*					Unit or Apartment	Zip C	Code*
*Note that if yo Physical A	-	not the the physical address	s for your pet, you	must complete th	he Phys	ical Address section	belov	v.
Street Number* Street Name*					Unit or Apartment Zip			Code*
Pet Inform	ation							
Pet's Name*				Pet's Breed*				Pet's DOB (MM/DD/YYYY)
Gender*	○ Female	Spayed/Neutered* O Yes O No	Microchipped*	○ No	If yes, provide microchip number		r	
Color*		Veterinary Clinic		Tag Type* Small (0.86 inches) Large			.25 i	nches)
 Intact Dog 	eutered Dog- One \ - One Year \$50.00 eutered Dog- Senio				eutered	One Year \$50.00 Cat- One Year \$5 ear \$25.00		
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 \$10 \$20 \$50 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.)							Sum Received*	
○ Check	,	•	-					
		3						

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 Place, Suite 1 East Syracuse NY 13057