



THE MUNICIPALITY OF THE COUNTY OF KINGS

87 CORNWALLIS STREET

PO BOX 100, KENTVILLE, NS B4N 3W3

Phone: (902) 690-6144 or Toll Free: 1-888-337-2999

Email: dogs@countyofkings.ca

Owner Information:

First Name		Initial	Last Name	
Civic #	Street		Town/Village	Postal Code
Mailing Address (if different)			Town/Village	Postal Code
Phone (Residence)		Phone (Business)		Phone (Cellular)
Email Address:				
By providing your e-mail address you authorize the Municipality to send you annual reminders regarding dog registration.				
Registered Kennel Business Name (For Kennel Registration Only):				

Dog Tattoo or Chip Number (please specify):

1)	2)	3)	4)
5)	6)	7)	8)

NEW TAG # (for Office use)	BREED:	(Size SML) S 5- 20 lb M 20-40 lb L 40 + lb	SEX (M/F)	CHECK BOX IF SPAYED OR NEUTERED	COLOR:	DOG'S NAME:	FEE:
1				<input type="checkbox"/>			
2				<input type="checkbox"/>			
3				<input type="checkbox"/>			
4				<input type="checkbox"/>			
5				<input type="checkbox"/>			
6				<input type="checkbox"/>			
7				<input type="checkbox"/>			
8				<input type="checkbox"/>			
9				<input type="checkbox"/>			
10				<input type="checkbox"/>			
Please make the cheque payable to the Municipality of Kings unless you are registering at the Village Offices or Kings County SPCA.						TOTAL	\$
						Cheque Number:	

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Signature

Print Name

Date

FOR OFFICE USE ONLY

Date Received	Received By	Entered by	Entered Date
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