



TOWN HALL  
 6311 Old Church Road, Caledon, ON L7C 1J6  
 905.584.2272 | 1.888.CALEDON | FAX 905.584.4325 | www.caledon.ca

### DOG LICENCE APPLICATION

Please apply via mail or in person at the Caledon Animal Shelter or Town Hall.  
 Dog licences expire December 31 and are not transferable. Town of Caledon By-Law 2006-127 states that only three (3) dogs per property are permitted.

Please check to indicate type of application

New       Renewal       Replacement Tag

#### OWNER INFORMATION

First Name _____		Last Name _____	
Street Address _____			
Mailing Address _____ (if different than above)			
City _____	Telephone # (H) _____	(B) _____	
Postal Code _____	Emergency Contact _____		
e-mail address _____			

#### FIRST DOG'S INFORMATION

Dog's Name _____		Sex	M <input type="checkbox"/>	F <input type="checkbox"/>
Breed _____		Spayed or Neutered	Y <input type="checkbox"/>	N <input type="checkbox"/>
Colour _____	Age _____	For Office Use Only		
Microchip/Tattoo# _____		Dog Tag # _____		
Please pay this amount		Date _____		
Price includes Caledon Animal Shelter surcharge		For 1 dog total \$40.00		
<b>\$40.00</b>				

#### SECOND DOG'S INFORMATION

Dog's Name _____		Sex	M <input type="checkbox"/>	F <input type="checkbox"/>
Breed _____		Spayed or Neutered	Y <input type="checkbox"/>	N <input type="checkbox"/>
Colour _____	Age _____	For Office Use Only		
Microchip/Tattoo# _____		Dog Tag # _____		
Please pay this amount		Date _____		
Price includes Caledon Animal Shelter surcharge		For 2 dogs total \$80.00 (\$40.00+\$40.00)		
<b>\$40.00</b>				

#### THIRD DOG'S INFORMATION

Dog's Name _____		Sex	M <input type="checkbox"/>	F <input type="checkbox"/>
Breed _____		Spayed or Neutered	Y <input type="checkbox"/>	N <input type="checkbox"/>
Colour _____	Age _____	For Office Use Only		
Microchip/Tattoo# _____		Dog Tag # _____		
Please pay this amount		Date _____		
Price includes Caledon Animal Shelter surcharge		For 3 dogs total \$120.00 (\$40.00+\$40.00+\$40.00)		
<b>\$40.00</b>				

PAID BY: Cash    Cheque    Credit Card    TOTAL PAYMENT ENCLOSED:  
 Please make cheques payable to: Town of Caledon & mail to Caledon Animal Shelter 12889 Coleraine Dr. Caledon L7E 3B5

Card Type: MC    VISA  
 Card # \_\_\_\_\_  
 Expiry Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_

*The Municipal Freedom of Information & Right of Privacy Act states that we must seek your permission to use your telephone number and address if necessary, in order to contact you about your dog.*

Please circle YES or NO and sign below.

Signature: \_\_\_\_\_