



City of **Sergeant Bluff, IA**

401 Fourth Street

Sergeant Bluff, IA 51054

(712) 943-4244

Dog Registration Form

Owner: _____ **Date:** _____

Address: _____ **Phone:** _____

E-mail: _____

Veterinarian: _____ **Phone:** _____

Address: _____

Pet Name: _____ **Breed:** _____

Markings: _____ **Weight:** _____ **Color:** _____

Sex: Male Female **Vaccinated:** Yes No **Spay** **Neutered**

Pet Name: _____ **Breed:** _____

Markings: _____ **Weight:** _____ **Color:** _____

Sex: Male Female **Vaccinated:** Yes No **Spay** **Neutered**

Pet Name: _____ **Breed:** _____

Markings: _____ **Weight:** _____ **Color:** _____

Sex: Male Female **Vaccinated:** Yes No **Spay** **Neutered**

There is a **one-time** registration fee of **\$10.00 for each pet.**

Dog Impound Fees: First Offense- **FREE** Second Offense- **\$15.00** Third Offense- **\$25.00**

Please include a copy of vaccinations and spay or neuter. (If Applicable)

Please include a picture of each dog separately.

Owner's Signature: _____

Date: _____