AMINA CE TO SERVICE SE

Fax: 951-471-8285

Shelter pets... heads and tails above the rest!

33751 Mission Trail www.animalfriendsofthevalleys.com Wildomar, CA 92595 951-674-0618

ANIMAL LICENSE APPLICATION

PLEASE PRINT: (YOU MAY PHOTOCOPY THIS FORM IS YOU WISH TO PURCHASE LICENSES FOR MORE THAN ONE ANIMAL.)

Owners Name:			
Mailing Address:			
Physical Address:			
<i>,</i> Email:			
	LIKE TO RECEIVE OUR NEW		JPDATES: Y/N:
ANIMAL INFORMATION:		-	
-	Breed:		Color:
			Months:
			ation date:
	City	ЕХРП	ation date:
INSTRUCTIONS:			
Liconcing is required by State	Law and Local City/County	ardinancae far rahiae r	rovention AEV is the local
,		•	prevention. AFV is the local
appointed authority on rabies	s. Report ALL dog/cat bites i	mmediately.	
appointed authority on rabies • Rabies Certificate MU	s. Report ALL dog/cat bites i <u>UST</u> be attached to this forn	mmediately. n. A license may be pur	chased for one, two, or three
 Rabies Certificate MU years based on the ra 	s. Report ALL dog/cat bites i <u>UST</u> be attached to this forn abies expiration date. (Licen	mmediately. n. A license may be pur	chased for one, two, or three
 Rabies Certificate MI years based on the rabies vaccinatio 	s. Report ALL dog/cat bites in the second se	mmediately. n. A license may be pur se expiration may not	chased for one, two, or three exceed the expiration date of
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