

2023 ST. CROIX COUNTY DOG LICENSE APPLICATION**PAYMENT DUE BY JANUARY 31st, 2023**

Owner's Name:

Phone #:

Make check payable to:

TOWN OF HAMMOND

PO BOX 177

HAMMOND, WI 54015

Address:

Date Paid:

Cash / Check

Dog #1

Dog #2

Dog #3

Dog #4

DOG NAME

COLOR

BREED

MALE \$10.00

NEUTERED MALE \$5.00

FEMALE \$10.00

SPAYED FEMALE \$5.00

RABIES VACCINE MFG #

DATE GIVEN:

DATE EXP:

Office use: Tag # Assigned