

Pet Licence Form

To obtain additional forms you can go online to whitby.docupet.com/offline or email us at info@docupet.com



Contact Information

First Name*	Last Name*
Email Address (required for online account)	
Telephone*	Cellphone

Mailing Address[†]

Street Number*	Street Name*	Unit or Apartment	City	Postal Code*
----------------	--------------	-------------------	------	--------------

[†]Note that if your mailing address is not the the physical address for your pet, you must complete the Physical Address section below.

Physical Address

Street Number*	Street Name*	Unit or Apartment	City	Postal Code*
----------------	--------------	-------------------	------	--------------

Pet Information

Pet's Name*		Pet's Breed*		Pet's DOB (YYYY/MM/DD)
Gender*	Spayed/Neutered*	Microchipped*	If yes, provide microchip number	
<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No		
Colour*	Veterinary Clinic	Tag Type*		
		<input type="radio"/> Small (22.5mm x 25mm) <input type="radio"/> Large (30mm x 33.2mm)		
Licence Type				
<input type="radio"/> Spayed/Neutered Dog Licence - 1 Year \$31.55				
<input type="radio"/> Spayed/Neutered & Microchipped Dog Licence - 1 Year \$26.45				
<input type="radio"/> Intact Dog Licence - 1 Year \$58.00				
<input type="radio"/> Intact & Microchipped Dog Licence - 1 Year \$52.90				
<input type="radio"/> Spayed/Neutered Cat Licence - 1 Year \$31.55				
<input type="radio"/> Spayed/Neutered & Microchipped Cat Licence - 1 Year \$26.45				
<input type="radio"/> Intact Cat Licence - 1 Year \$58.00				
<input type="radio"/> Intact & Microchipped Cat Licence - 1 Year \$52.90				

Payment & Donation*

Yes! I want to help more pets in my community find a safe and happy home. I want to make a donation of			Sum Received*	
<input type="radio"/> \$5 <input type="radio"/> \$10 <input type="radio"/> \$25 <input type="radio"/> \$50			\$	
Payment Type				
<input type="radio"/> Cheque <input type="radio"/> Mastercard <input type="radio"/> VISA				
Credit Card Holder Name	Credit Card Number	CVC	Expiry Date (YYYY/MM)	

Who do I make a cheque out to?

Please make cheques payable to DocuPet.

Where do I mail this form?

DocuPet
2 Gore St
Kingston ON K7L 2L1