

TOWN OF MIDDLESEX VERMONT

2019 Dog Renewal Form

Owner's Name: _____

Address: _____

Telephone (best way to reach you): _____

Dog's Name: _____ Age: _____

Breed: _____ Weight (S/M/L): _____

Color: _____ Neutered or Spayed (Y/N): _____

Rabies Date (Include Rabies Certificate if Currently Expired): _____

Veterinarian Name: _____

**FEES: \$9 per fixed dog/\$13 per intact. Please make checks payable to the Town of Middlesex and mail to:
Town of Middlesex, 5 Church St., Middlesex, VT 05602. Dogs must be licensed by April 1, 2019.**