## PET REGISTRATION FORM Amended Bylaw November 17, 2004 (effective – January 1, 2005)

Unit No.: Name of Pet Owner:			Date of Registration: No. of Pets:		
<b>DESCRIPTION:</b>		(1)		(2	2)
Type of Pet:					
Name of Pet:					
Male/Female:					
Date of Birth:	(Month)	(Year)		(Month)	(Year)
Breed:					
Size:					
Color:					
Tattoo or Special Ma	rk:				
Neutered or Spayed a	late:				
Cats Declawed:	Yes	No		Yes	No
City License #:					
Rabies Vaccination a	late:				
Please list any <u>caged</u>	pets here: (Max	timum allowed - 2 ca	nged pets)		

**Declaration by Pet Owner:** 

As owner of the mentioned pets, I declare that I have received and read a copy of the Co-op Animal Control Bylaws included in the V.C.C.L. Member Handbook and agree to abide by those standards. I understand that failure to abide by the regulations may lead to the imposition of penalties and/or removal of the offending pet(s). I further understand that my failure to abide by any action or order issued by the Co-op in regard to my pet(s) may lead to further action against me.

\*\*\* <u>A DEPOSIT OF \$250.00 IS REQUIRED</u>. To the extent that the deposit is not needed to cover damages. It will be refunded, without interest, when the member leaves the co-op.

THIS FORM MUST BE COMPLETED AND THE DEPOSIT PAID PRIOR TO MOVE-IN.

Member signature: \_\_\_\_\_

Duie of I et Deposit.	Date of Pet Deposit:	
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Co-op Witness: