

# 2019 DOG REGISTRATION FORM

CITY OF LAKE QUIVIRA

OWNER	_____	_____
	LAST	FIRST
ADDRESS	_____	LAKE QUIVIRA KS 66217
PHONE:	(    )	_____
e-Mail	_____	

**PROVIDE A COPY OF RABIES VACCINATION FOR EACH OF THE DOGS LISTED BELOW**

DOG #1	\$15.00					<input type="checkbox"/>	
BREED	_____	SEX	M	F	Microchipped	Y	N
COLOR	_____	NAME	_____				

DOG #2	\$25.00					<input type="checkbox"/>	
BREED	_____	SEX	M	F	Microchipped	Y	N
COLOR	_____	NAME	_____				

DOG #3	\$50.00					<input type="checkbox"/>	
BREED	_____	SEX	M	F	Microchipped	Y	N
COLOR	_____	NAME	_____				

DOG #4	\$50.00					<input type="checkbox"/>	
BREED	_____	SEX	M	F	Microchipped	Y	N
COLOR	_____	NAME	_____				

DOG #5	\$50.00					<input type="checkbox"/>	
BREED	_____	SEX	M	F	Microchipped	Y	N
COLOR	_____	NAME	_____				

**You can mail this form, payment and copies of vaccinations to:**

**City of Lake Quivira  
10 Crescent Blvd  
Lake Quivira Ks 66217**