## F:\web\images\ARTS\postcards\Shire_Crest_Colour.jpgShire of Goomalling

## Application Form

## Dog Registration

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Owner/Agent)

Of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Address)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of Dog |   |   |   |   |   |   |
| Age | Years |   | Months |   |   |   |
| Sex | Male  |   | Female |   |   |   |
| Sterilised | YES |   | NO |   |   |   |
| Microchip Number |   |   |   |   |   |   |
| Colour/Distinguishing marks |   |   |   |   |   |   |
| Breed/Kind of dogs |   |   |   |   |   |   |
| Concession Number if applicable |   |   |   |   |   |   |
| Owners Full Name |   |   |   |   |   |   |
| Postal Address |   |   |   |   |   |   |
| Premises where dog will ordinarily kept |   |   |   |   |   |   |
| Home Number |   |   |   |   |   |   |
| Mobile Number |   |   |   |   |   |   |
| Email Address |   |   |   |   |   |   |
| Term of Registration | 1 Year |   | 3 Years |   | Life |   |

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR OFFICE USE ONLY**

Fees Payable

Unsterilised dog 1 Year $50.00 3 Years $120.00 Life $250.00

Sterilised Dog 1 Year $20.00 3 Years $42.50 Life $100.00

Pensioners ½ Registration Fee

Working Dogs ¼ Registration Fee

This Registration is Valid until \_\_/\_\_/\_\_ Tag Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Issue: \_\_\_/\_\_\_/\_\_\_ signature of registration officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administration Centre T: (08)96291101

32 Quinlan Street (PO Box 118) F: (08) 96291017

Goomalling WA 6460 E: goshire@goomalling.wa.gov.au