

Shire of Goomalling

Application form

Cat Registration

of		(OW	ner/agent) D.O.B	/ (Address)		
the owner/as the duly declare that - (a) I am, true to the best of my	the owner is not under knowledge and belief; a	owner of the cats particular owner of the cats particular spears of age; and (b) the cat within those premises	ne particulars shown oxist on the premises at	d in this application,		
Name of Cat						
Age						
Sex	Male		Female			
Sterilised	YES		NO			
Microchip Number						
Colour & Distinguishin	g Marks					
Breed of Cat						
Concession Number:	er: Exp Date: / /					
Postal Address						
Premises where cat w	ill ordinarily be kept					
Home Number						
Mobile Number						
Term of Registration	1 year	3 уеа	ars	Life		
Signature:	Date:					
FOR OFFICE USE ONLY	FEES PAYABLE					
Sterilised Cat Breeding Cat Pensioners ½ Registration	1 year - \$50.00	3 years - \$42.50 3 Years - \$120.00 er 31 May ½ Registration Fee	Life - \$100.00 Life - \$250.00 (except Life)			
This registration is validate of issue:/_	d until// /					
Shire Office: 32 Quinlan Street	(PO Box 118) Goomalling WA 640	60 Ph:9629 1101 Fa	x: 9629 1017 Email: goshir	re@goomalling.wa.gov.au		