

_____ (owner) Date of Birth: _____

_____ (Address)

the owner of the dogs particulars of which are listed in this application, declare that I am not under 18 years of age, the particulars shown on this application are true to the best of my knowledge and belief and I certify that means exist on the premises at which the dog will ordinarily be kept for effectively confining the dog within those premises.

۱ ___ of_

Name of Dog		
Age	Is this a Declared Dangerous De	og Y / N
Sex Male	Female	
Sterilised (proof required) YE	S N	10
Microchip Number		
Colour & Distinguishing Marks		
Breed of Dog		
Concession Number:	Exp Date: / /	
Postal Address		
Premises where dog will ordinarily be kept		
Home Number		
Mobile Number		
Term of Registration 1 year	3 years	Life
Signature: D	ate:	
FOR OFFICE USE ONLY FEES PAYABLE		
Un sterilised Dog/Bitch 1 year - \$50.00 3 years - \$120.00	Life - \$250.00	
Sterilised Dog/Bitch 1 year - \$20.00 3 years - \$42.50	Life - \$100.00	
Pensioners ¹ / ₂ Registration Fee Working Dogs ¹ / ₄ Registr	ation Fee Registrations after 1 st May ¹ / ₂	Registration Fee (I
year only)		
This registration is valid until / /	Tag Number:	
Date of issue: / /	Signature of registration officer:	
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