

DOG LICENSE FORM

Owner's Name: _____

Address: _____

City, State, Zip: _____

Phone #: _____

Dog's Name: _____

If you own any dogs, please return this form, proof of rabies vaccinations, your license fee and a self addressed envelope to:

Village of Highland
PO Box 284
Highland WI 53543

	DOG #1	DOG #2	DOG #3
Dog's Name			
Breed			
Color			
Dates Rabies Shot Given			
Rabies Shot Expiration			
Veterinary Office			
Vaccine Mfg			
Serial #			
Male/Female			
Spayed or Neutered			
Fee*			

*Fees are \$5.00 for a spayed female or neutered male or \$10.00 if not spayed or neutered.

Wis. Stats. 174.05 requires the owner of a dog more than five (5) months of age on January 1, or five (5) months of age within a license year **to annually pay the dog license tax and obtain a license.** Licenses are issued when the Municipal Clerk receives verification of rabies vaccination. Rabies vaccination is important to promote health, safety and general welfare of animals and the people around them