Prairie Paws Animal Shelter 3173 Hwy K 68 Ottawa, K\$ 66067 (785) 242-2967

Animal License Application

Hours of Operation:

Monday - 11-6

Tuesday -- Closed Wednesday - 11-6

Thursday - 11-6

Friday - Closed

Saturday -- 11-4 Sunday - Closed

Please Print

ALL LICENSES EXPIRE DECEMBER 31st

LICENSE FEES:

(785) 242-7151

\$8.00 - Altered

\$40.00 - Unaltered

animal shelter ...

Name (Last, first)			- Was verille saver	
Street Address				
City Mailing Address (if same as hom	State		Zip Code	
Mailing Address (if same as hom	e address please write "same"			VED :
City Primary Phone Number	State		Zip Code	
Primary Phone Number	Seco	ndary Phone Numbe	er	
E-mail				
ANIMAL INFORMATION				
Name	Date of Birth	Bree	d	
Primary Color				
Microchip # (if any)				
Gender: ☐ MALE ☐	FEMALE	Altered:	☐YES (provide proof)	□NC
		P. GOGTS SWOWS AND ONE		
Date last given	F	vniration Date		
Date last given Manufacturer	Lot #	xpiration Date Ser	ial#	
Manufacturer Vaccination brand name	Lot #Veterinar	ian/ Clinic Ser	ial #	
Date last given Manufacturer Vaccination brand name I hereby certify that all statemen understand that any misstateme	Lot #Veterinar ts made in this application are	ian/ Clinic Ser true and complete to	ial # o the best of my knowledge	
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Manufacturer	Lot #	ian/ Clinic Ser true and complete to nay cause denial or r	ial # o the best of my knowledge evocation of the license. Date	

CREDIT CARD PAYMENT (TYPE OF CARD) VISA/DISCOVER/MASTERCARD/AMERICAN EXPRESS (FILL IN TYPE) NAME ON CARD ADDRESS CREDIT CARD NUMBER SECURITY CODE (3 NUMBERS ON BACK) EXPIRATION DATE