Fort St. John Pet Licence Form

To obtain additional forms you can go online to fortstjohn.docupet.com/offline or email us at info@docupet.com. Unless otherwise specified, this form must be completed in its entirety.



Contact Ir	nformation										
First Name				Last N	Last Name						
Email Addre	ess (Optional: required	for online account and elec	tronic renewal remin	ders)							
Telephone Phone Ty			Туре			*	*DOB (YYYY/MM/DD)				
			○ Home ○ Mobile ○ Work								
					*Optional						
Mailing Ad	ddress										
Street Number	Street Name				Unit or Apartment					Postal Code	
		ical address for your pet, y	ou must complete	the Physical A	Address section	n belo	w.				
Physical A	1										
Street Number	Street Name				Unit or Apartment	City		Postal Code			
Pet Inform	nation										
Pet's Name				Pet's Bree	Pet's Breed				Pet's DOB (\	YYY/MM/DD)	
Sex	Spayed/Neutered Microchi			pped	ped If yes, provide mic			rochip number			
○ Male	1ale \bigcirc Female \bigcirc Yes \bigcirc No \bigcirc Yes			\bigcirc No	○ No						
Colour Veterinary Clinic					Tag Size ○ Small (22.5mm x 25mm) ○ Large (30mm x 33.2mm)						
Licence Typ O Dog Lice	ence \$20.00										
Payment &	§ Donation										
Yes! I want to help more pets in my community find a safe and happy home. I want to make a donation of								Sum Received			
								\$			
Payment Ty	•										
○ Chequ	e										

Who do I make a cheque out to?

Please make cheques payable to DocuPet

Where do I mail this form?

DocuPet 2 Gore St Kingston ON K7L 2L1