



# Village of Lakewood Bark Park Registration Form

## Owner Information

Name of Owner(s):

Address:

City / State / Zip:

Phone:

Additional Phone:

Email:

## Dog Information

Name of Dog:

Sex: Male or Female

Weight:

Breed:

Color:

Age of Dog:

Has the dog ever bitten a person or a dog?

Dog License #:

License Expiration Date:

Name of Municipality issuing Dog License:

Rabies Expiration Date:

## Dog Information

Name of Dog:

Sex: Male or Female

Weight:

Breed:

Color:

Age of Dog:

Has the dog ever bitten a person or a dog?

Dog License #:

License Expiration Date:

Name of Municipality issuing Dog License:

Rabies Expiration Date:

## Dog Information

Name of Dog:

Sex: Male or Female

Weight:

Breed:

Color:

Age of Dog:

Has the dog ever bitten a person or a dog?

Dog License #:

License Expiration Date:

Name of Municipality issuing Dog License:

Rabies Expiration Date:

I certify that the above information is true and correct to the best of my knowledge and that I have received a copy of the Village of Lakewood Dog Park Rules.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_