

LRENNA

Pet Registration 2010

Cat _____ Dog _____ Other _____

Owner's Name _____

Address _____

Email _____

Telephone Numbers (H) _____ (W) _____ (C) _____

Alternate Contact (Name) _____ (Phone) _____

Pet Description

Pet's Name _____ Male _____ Female _____ Age _____

Breed _____ Color _____

Size/Weight _____ Identifying Marks _____

Microchip Yes _____ No _____ Tags Yes _____ No _____

Collar Yes _____ No _____ Description of Collar: _____

Shots Current Yes _____ No _____ Health _____

Temperament _____

Will Pet go to Strangers? _____

Should pet be approached with caution? _____ If yes, why _____

Vet Information

Name: _____

Address: _____ Phone _____

If your pet is injured and needs medical attention, will you accept the veterinary charges incurred? Yes _____ No _____

Are you willing to foster a lost pet until reunited with a family? Yes _____ No _____

Signature: _____ Date: _____

Please return this form to: LRENNA Pet Registry

P O Box 38002

Dallas, TX 75238-0002

Or email to: petregistry@lakeridgeestatesnorth.org

The sole purpose of the LRENNA Pet Registry is to help unite lost pets with their owners.