DOG LICENSE

MEDFORD RESIDENTS are required to license their dog(s) annually.

OWNER INFO:
Name:__________________________________________
First  
Last

Address: ____________________________________________
Number  Street Name  Apt.#  Zip

Home Phone: ___________________  Work Phone: ___________________

Email: ________________________________

Dog Info:
Name: ____________________________

Sex: ____________________________ (Male? Female? Neutered Male? Spayed Female?)
Please include original certificate of spaying or neutering from vet.

Colors: ____________________________
Predominant  Secondary  Other

Breeds: ____________________________
Predominant  Secondary  Other

Age of Dog: ____________________________

A Valid anti rabies vaccination certificate must accompany this application.

Vet Name: ____________________________

Date of Rabies Shot: ___________________  Expiration Date: ___________________

Annual License Fee:  Male $15.00  Neutered Male $10.00
Female $15.00  Spayed Female $10.00

Payments: Cash or Checks, payable to the City of Medford (no credit cards accepted)

Mail to: Medford City Clerk
Room 103, City Hall
85 George P. Hassett Dr.
Medford, Ma. 02155

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