



**BELLINGHAM
MAIL IN DOG REGISTRATION FORM**

Name: _____

Address: _____

Telephone Number: _____ Owner's Birth Date: _____

E-Mail Address: _____

Dog's Name	Birth Date	Color(s)	Breed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Fill-In Quantity of each group or leave blank if not applicable:

☐

Male \$20.00

☐

Female \$20

☐

Neutered Male \$15

☐

Spayed Female \$15

Late fee per household after May 1st \$25.00

A **copy of current rabies certificate must be attached** and a check for the correct amount to include a \$25 late fee per household as of **May 1st**, payable to the **TOWN OF BELLINGHAM**.

Include a self-addressed stamped envelope (*if more than two dogs, place 2 stamps on the envelope*) and send to:

**Bellingham Municipal Center
Town Clerk's Office
10 Mechanic Street
Bellingham, MA 02019**

****Please note registrations will not be processed and checks will be returned if rabies certificates are not attached.**