

DOG TAG INFORMATION FORM



T 780.985.3604 F 780.985.3039
PO Box 750 Calmar, AB T0C 0V0

Calmar.ca

Name of Dog: _____ Breed: _____

Colour: _____ Age: _____ Marks/ Tattoos: _____

Male Female Neutered/ Spayed: Yes No *Documentation required.*

Owner's Name: _____

Mailing Address: _____
Unit/ PO Box # Street Municipality Postal Code

Email Address: _____ Phone Number: _____

Vet's Name: _____

Address: _____ Phone Number: _____

I, the undersigned:

1. Accept full responsibility that the foresaid information is true, and the Animal described above is indeed owned by me.
2. Accept full responsibility for all liability related to the control of the Animal.
3. Absolve the Town of Calmar of any liability whatsoever which may result from the actions of the Animal in my care and control, and
4. Am of the age of 18 or older.
5. The Owner of a Dog shall obtain a one-year temporary license for such Dog at such times and apply for a permanent license one year from the date of the temporary license in the manner as specified in section 3 of Bylaw 2020-18.
6. The Owner of a Dog shall maintain orderly conduct of their pet, or a continuance of the "Temporary License" will continue at the yearly rate.

**Please ensure you are up to date with the most current Pet Bylaws from the Town of Calmar. Bylaws can be found on our website: www.calmar.ca or at the Town Office.*

FEES

Un-neutered/Un-spayed: \$60.00 Neutered/Spayed: \$30.00
Tag Replacement: \$10.00 each (proof of previous license must be provided)

Total Fees: _____ Tag #: _____

Signature: _____ Date: _____

Witnessed by: _____ Receipt #: _____

Once filled out, please email the form to info@calmar.ca to schedule payment, or come to the Town Office to pay in person: 4901 – 50 Avenue