

License Year: 2023

ANIMAL LICENSE

La Crosse County, WI

License Expires 12/31/2023

Issued by: Town of Shelby
Sara Jarr
2800 Ward Ave
La Crosse WI 54601

608-788-1032

| | | |
|--|------|------|
| Primary Owner (First Name - Middle Initial - Last Name): | DOB: | DL#: |
|--|------|------|

| | | |
|--|------|------|
| Secondary Owner (First Name - Middle Initial - Last Name): | DOB: | DL#: |
|--|------|------|

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|---|
| Street Address (House # - Street - City - State - Zipcode): |
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|--|
| Mailing Address (House # - Street - City - State - Zipcode): |
|--|

| | |
|-------------|--------------|
| Home Phone: | Other Phone: |
|-------------|--------------|

| | | | |
|--------|--------------|-------------|---|
| Tag #: | Date Issued: | Animal Sex: | Circle The Fee: Male: \$24.00 Female: \$24.00 Neutered: \$13.00 Spayed: \$13.00 |
|--------|--------------|-------------|---|

| | | | |
|--------------------------------------|--------------|-------------------|------------------|
| Proof Of Current Rabies Vaccination: | | Other: _____ | |
| Clinic: | Rabies #: | Vaccination Date: | Expiration Year: |
| Animal Name: | Color: | | Animal DOB: |
| Major Breed: | Minor Breed: | Other Breed: | |

| | | | |
|--------|--------------|-------------|---|
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|--------|--------------|-------------|---|

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| Major Breed: | Minor Breed: | Other Breed: | |