



# DOG LICENCE APPLICATION

Town of Whitecourt  
5004 - 52 Ave., Box 509  
Whitecourt, AB T7S 1N6  
www.whitecourt.ca  
Ph: 780-778-2273  
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The Town of Whitecourt Animal Control Bylaw No.1414 requires all dogs to be licenced.  
Pet owners are encouraged to review this Bylaw and become aware of their responsibilities.

The licence fee is \$15.00 for a spayed/neutered dog; \$30 for non-spayed/neutered.

(Discounted rates in December for the following year are \$11.25 spayed/neutered; \$22.50 non-spayed/neutered.)

## Owner Information (must be over 18):

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Include postal code)

Telephone: \_\_\_\_\_

*Please include the phone number at which you can most often be reached (e.g. cell) to ensure that if your dog is found, you can be contacted.*

FOR OFFICE USE ONLY	
Customer ID#:	_____
Document #:	_____
Pet Tag #:	_____
Fee: \$	_____

## Dog Information:

Pet's Name: \_\_\_\_\_

Sex: Female  Male

Breed: \_\_\_\_\_

Colour(s): \_\_\_\_\_

Is your pet spayed/neutered? Yes  No

Tattoo #: \_\_\_\_\_

The Whitecourt Website has an online feature which allows a pet's tag to be used to search for the pet's owner for the purpose of returning a lost pet. When the dog's information is matched to an owner, the following information is revealed to the searcher:

- Pet name, colour and gender
- Owner name and phone number

*Should you give your consent to allow this information to be published on the internet, the information will remain published until such time the Town of Whitecourt is notified by you in writing to change this.*

If you DO want the Town of Whitecourt to release your full name and phone number, as indicated above, please initial here: \_\_\_\_\_

\_\_\_\_\_  
Applicant Printed Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Personal information collected on this form is collected for municipal and financial operations pursuant to Section 33(c) of the Freedom of Information Protection of Privacy Act. Should you have any questions regarding the information collected on this form, you may contact the Foip Coordinator at the contact address and phone number at the top of this form.