

PET APPLICATION AND REGISTRATION FORM

(NON PET OWNERS: Please Complete Top Section Check Appropriate Statement at Bottom, Sign, Date and Return) **** PETS CAN BE NO MORE THAN 35 POUNDS****

OWNER, RESIDENT OR TENANT INFORMATION
Unit Address:

Name:	Name of Emergency Contact Person:
Home Phone:	Emergency Phone:
Work Phone:	Cell phone of Owner/Resident/Tenant:
E-mail Address:	

PET INFORMATION (YOU MUST INCLUDE PHOTO OF PET AND VET PAPERWORK)		
Pet's Name:		
Type of Pet: Dog or Cat or Other:	Sex:	Coloring/Markings:
Primary Breed: (i.e. Poodle, Siamese, etc):	Secondary Breed:	
License or ID number:	Rabies Tag Number:	
Date Spayed or Neutered	Approximate Adult Weight	
Specified also with which was done:	(specify lbs or kgs):	
Does your pet stay primarily Indoors or Outdoors?		
(please explain):		
Is your pet covered by insurance? Yes or No (If yes, provide insurance information):		

_____ I have read, understand and hereby acknowledge that I DO NOT own a pet, however, if in the future I decide to own a pet I hereby acknowledge that I have received a copy of the Pet Policy and a copy of the By Law of the Association's Rules and Regulations pertaining to Pets, and that I and members of my household promise to fully comply, including being held responsible for any damage or injury caused by my/our pet and will contact The Association office failure to do so will subject me to an Association Fine.

_____ I have read, understand and hereby acknowledge that I DO own a pet and I have received a copy of the Pet Policy and a copy of the By Law of the Association's Rules and Regulations pertaining to Pets, and that I and members of my household promise to fully comply, including being held responsible for any damage or injury caused by my/our pet.

Signature

Date

FOR OFFICIAL USE ONLY

I have reviewed the above Pet registration Form and approve this pet.

Signature of Board of Directors

Date

c/o 10112 USA Today Way, Miramar, Florida 33025 Telephone 954.922.3514 Toll Free 800.714.3514 Fax 954.922-9199

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