

Opening hours Mon-Wed-Thurs. from 8:30 a.m. to 5 p.m., Tues. from 8:30 a.m. to 7 p.m. and Friday from 8:30 a.m. to 12:30 p.m.

CORRESPONDENCE

<input type="checkbox"/> French	<input type="checkbox"/> English
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*** Mandatory informations**

OWNER

Name *		Surname *	
Address *			
			Postal code *
Telephone (home) *	Telephone (office)	E-Mail address	
Notes (move, death of an animal, other)			
Budget number: CATS 01-151-13-001 (2436-0010000-305706-06103-45109-012828)		Payment	
		<input type="checkbox"/> Cash	<input type="checkbox"/> Check
		<input type="checkbox"/> Debit card	<input type="checkbox"/> Credit card

FIRST CAT

Grey areas for administration use only

Licence no. 2011	Licence no. 2012	Issuing date 2012	Cost of the licence *
			<input type="checkbox"/> 25 \$ <input type="checkbox"/> 0 \$ <i>If the cat is neutered</i>
Name *		Validity period January 1 st to December 31 st 2012	
Breed *	Hair <input type="checkbox"/> Short <input type="checkbox"/> Long	Veterinary (name and phone no.)	
Sex * <input type="checkbox"/> Female <input type="checkbox"/> Male	Color *	Vaccinated (rabies)* <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Neutered * <input type="checkbox"/> Yes <input type="checkbox"/> No
Age * <input type="checkbox"/> Months <input type="checkbox"/> Years	Microchip no.	IF THE CAT IS NEUTERED, ENCLOSE PROOF OF NEUTERING	
Other distinguishing features		Origin of the animal <input type="checkbox"/> Refuge <input type="checkbox"/> Pet shop <input type="checkbox"/> Breeder <input type="checkbox"/> Individual <input type="checkbox"/> Other:	

SECOND CAT

Grey areas for administration use only

Licence no. 2011	Licence no. 2012	Issuing date 2012	Cost of the licence *
			<input type="checkbox"/> 25 \$ <input type="checkbox"/> 0 \$ <i>If the cat is neutered</i>
Name *		Validity period January 1 st to December 31 st 2012	
Breed *	Hair <input type="checkbox"/> Short <input type="checkbox"/> Long	Veterinary (name and phone no.)	
Sex * <input type="checkbox"/> Female <input type="checkbox"/> Male	Color *	Vaccinated * <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Neutered * <input type="checkbox"/> Yes <input type="checkbox"/> No
Age * <input type="checkbox"/> Months <input type="checkbox"/> Years	Microchip no.	IF THE CAT IS NEUTERED, ENCLOSE PROOF OF NEUTERING	
Other distinguishing features		Origin of the animal <input type="checkbox"/> Refuge <input type="checkbox"/> Pet shop <input type="checkbox"/> Breeder <input type="checkbox"/> Individual <input type="checkbox"/> Other:	

DECLARATION AND SIGNATURE

I declare that:	
<ul style="list-style-type: none"> • all the information provided on this form is true • I pledge to inform the proper authority of any changes of information related to the present form • I have read and agree to respect the <i>Charte du bon comportement du gardien d'un animal</i> 	
Signature	Date

Any false declaration may result in prosecution