

Page Shores Condominium Association, Inc.

Pet Registration Form

Fill out this form and mail it to: The Select Group, 2224 Virginia Beach Blvd., Suite 201, Virginia Beach, Virginia 23454. *IF YOU DO NOT OWN A PET, MARK "NO PET" SIGN, DATE & SUBMIT TO THE SELECT GROUP INC.*

_____ NO PET

Owner/ Resident Name: _____

Unit Address: _____

Phone: (h) _____ (w) _____ (c) _____

I own _____ cats

Cat(s) Name(s) _____

Description (Size, Color, Breed, Distinguishing Markings/Characteristics) _____

Date(s) of Rabies Vaccination(s) _____

Tag Number(s) and Date(s) of Issuance _____

I own _____ dogs

Dog(s) Name(s) _____

Description (Size, Color, Breed, Distinguishing Markings/Characteristics) _____

Date(s) of Rabies Vaccination(s) _____

Tag Number(s) and Date(s) of Issuance _____

**I HAVE READ THE PET RULES AND REGULATIONS OF THE ASSOCIATION AND
AGREE TO COMPLY WITH THE RULES AS THEY PERTAIN TO PET OWNERSHIP**

SIGNATURE

DATE