



HOMEOWNERS ASSOCIATION, INC.

c/o The Select Group, Inc., 2224 Virginia Beach Blvd., Suite 201, Virginia Beach, VA 23454
(757) 486-6000 fax: (757) 486-6988 email: select@theselectgroup.us

Pet Registration Form

**** Dog & Cats Only – 4 Maximum****

Owner(s)/Resident(s) Name: _____

Unit Address: _____

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

I own _____ indoor/outdoor Cat(s)
(#) (Circle One)

Cats Name: _____

Description (size, color, breed, distinguishing markings/characteristics): _____

Date(s) of rabies vaccination(s): _____

Tag(s) number(s) and date of issuance: _____

In the City/County of _____

I own _____ dogs(s)
(#)

Dogs Name: _____

Description (size, color, breed, distinguishing markings/characteristics): _____

Date(s) of rabies vaccination(s): _____

Tag(s) number(s) and date of issuance: _____

In the City/County of _____

I have read the rules and regulations of the association and I, as well as all members of the household, promise to comply with the rules as they pertain to pet ownership.

Signature

Date