

Birdneck North Condominium Association, Inc.

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

PET REGISTRATION FORM

(All Pets Need Board Approval)

Owner / Residents Name: _____

Unit Address: _____

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

I Own _____ **Cat(s)**

Cat(s) Name(s): _____

Description (Size, Color, Breed, Distinguishing Marks/Characteristics): _____

Date(s) of Rabies Vaccination(s): _____

Tag Number(s) & Date(s) of Issuance: _____

I Own _____ **Dog(s)**

Dog(s) Name(s): _____

Description (Size, Color, Breed, Distinguishing Marks/Characteristics): _____

Date(s) of Rabies Vaccination(s): _____

Tag Number(s) & 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

**Return completed form to The Select Group at the address or fax number provided above
or email to jstrickland@theselectgroup.us**