



## Chancellor Walk Condominium 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: [rphippins@theselectgroup.us](mailto:rphippins@theselectgroup.us) website: [www.theselectgroup.us](http://www.theselectgroup.us)

### **🐾 PET REGISTRATION FORM 🐾**

**No more than two pets; dog or cat. No weight restriction.**

**Check box if you have no pet**

Owner(s)/Resident(s) Name: \_\_\_\_\_

Unit Address: \_\_\_\_\_

Phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

I own \_\_\_\_\_ Cat(s). (Please Specify) \_\_\_\_\_ INDOOR \_\_\_\_\_ OUTDOOR

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 \_\_\_\_\_ Dog(s). (Please Specify) \_\_\_\_\_ INDOOR \_\_\_\_\_ OUTDOOR

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 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

**Return completed and signed form to [afleetwood@theselectgroup.us](mailto:afleetwood@theselectgroup.us)**