

CYPRESS RESERVE CONDOMINIUM ASSOCIATION, INC.

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

PET REGISTRATION FORM

****One (1) domestic dog or cat weighing less than 30 lbs. at maturity per household****

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

Unit Address: _____

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

I Own ____ Cat. Indoor ____/Outdoor ____ Cat.

Cat Name _____

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

Date of rabies vaccination _____

Tag number and date of issuance _____

In the City/County of _____

I Own ____ Dog. Indoor ____/Outdoor ____ Dog.

Dog Name _____

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

Date of rabies vaccination _____

Tag number and date of issuance _____

In the City/County of _____

I, as well as all members of my household 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

Please return completed form to The Select Group at the address or fax number provided above or email to mromero@theselectgroup.us