



LIGHTHOUSE POINT

PET REGISTRATION FORM

***IF YOU DO NOT OWN A PET, PLEASE CHECK HERE __ MARK "NO PET"**

1 DOG OR CAT 40 LBS OR LESS *OR* 2 DOGS OR 2 CATS OF 20 LBS EACH
OR 1 DOG & 1 CAT OF 20 LBS EACH ** 1 SMALL BIRD IN ADDITION TO ANY OF THE
ABOVE COMBINATIONS

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

Unit Address: _____

I Own ___ Cat(s). They are indoor _____/outdoor _____ Cat(s).

Cat(s) Name(s): _____

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 ___ Dog(s). They are indoor _____/outdoor _____ Dog(s).

Dog(s) Name(s): _____

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

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