



AT HILLPOINT HOMEOWNERS ASSOCIATION
c/o The Select Group, Inc.
2224 Virginia Beach Blvd., #201, Virginia Beach, VA 23454
(757) 486-6000 fax: (757) 486-6988
email: rphippins@theselectgroup.us
or visit us on the web: www.theselectgroup.us

PET REGISTRATION FORM

IF YOU DO NOT HAVE A PET, CLICK THE BOX AND THEN COMPLETE THE NAME & ADDRESS INFORMATION:

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

Address: _____

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

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: _____

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: _____

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 number above
or email to mromero@theselectgroup.us**