



PET REGISTRATION FORM

*****No pets are permitted in Cambridge Courts Condominiums
except those registered with the Association.*****

If you have no pets, please check NO PET

Unit Address: _____

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

I Own Cat(s) named: _____

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) named: _____

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, 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 below
or email to jstrickland@theselectgroup.us**

COMMUNITY WEBSITE
cambridgecourtsvb.communitysite.com