



SHIRE OF JERRAMUNGUP

Cat Registration Form

OWNER DETAILS:

Given names: _____ Surname: _____

Residential Address: _____

Postal Address: _____

Email: _____ Date of Birth: _____

Work / Home Phone: _____ Mobile: _____

Second Contact Name: _____ Phone: _____

DETAILS OF CAT

Name of Cat: _____ Microchip No*: _____ Sterilised: Yes / No*

Breed: _____ Colour: _____ Sex: Male / Female

Premises where the cat will ordinarily be kept: _____

Please tick the box for the registration term and fee applicable for this application:

| FEES | 1 Year | 3 Years | Lifetime |
|---------------|---------|----------|----------|
| Sterilised | \$20.00 | \$42.50 | \$100.00 |
| Unsterilised* | \$50.00 | \$120.00 | - |

* Pensioners who have approved concession cards are entitled to a 50% discount.

*If your cat is not micro-chipped or sterilised an exemption letter from your vet must be provided with this application.

DECLARATION

I declare that I am over the age of eighteen (18) years, and that the particulars shown in this application are true to the best of my knowledge and belief.

Signature _____

Date _____

OFFICE USE ONLY

Tag #: _____ Received By: _____ Signature: _____

Pension Card sighted Sterilisation Proof Attached EXPIRY DATE: 31 Oct _____



8 Vasey Street
PO Box 92
Jerramungup WA 6337
Ph: 08 9835 1022 Fax: 08 9835 1161
Email: admin@jerramungup.wa.gov.au

REGISTRATION CERTIFICATE

OWNER: _____ DATE: _____

CAT NAME: _____ SEX: Male / Female

BREED: _____ COLOUR: _____

MICROCHIP No: _____ STERILISED: Yes / No

Signature of Registration Officer: _____

REGISTRATION NO: _____ EXPIRY: 31 Oct _____