



Dog License Application Form

Please complete, sign and return this form along with the appropriate fees and proof of rabies vaccination to:
 City of Hudson
 505 Third Street
 Hudson, WI 54016
Make checks payable to: City of Hudson

Owner's Name _____ Phone _____

Street Address _____

| | DOG 1 | DOG 2 | DOG 3 |
|----------------------------------|--|--|--|
| SEX(Check one per column) | <input type="checkbox"/> Male \$20.00 <input type="checkbox"/> Neutered Male \$10.00 <input type="checkbox"/> Female \$20.00 <input type="checkbox"/> Spayed Female \$10.00 | <input type="checkbox"/> Male \$20.00 <input type="checkbox"/> Neutered Male \$10.00 <input type="checkbox"/> Female \$20.00 <input type="checkbox"/> Spayed Female \$10.00 | <input type="checkbox"/> Male \$20.00 <input type="checkbox"/> Neutered Male \$10.00 <input type="checkbox"/> Female \$20.00 <input type="checkbox"/> Spayed Female \$10.00 |
| Dog Name | | | |
| Color | | | |
| Breed | | | |
| Date Vaccinated | | | |
| Veterinary Clinic | | | |
| Vaccine Mfg. Name | | | |
| Vaccine Serial Number | | | |
| Vaccine Expiration Date | | | |

(Signed) _____

| For Staff Use Only | | | |
|--------------------|--------------|--------------|--------------|
| Tag # | Tag # | Tag # | Paid: |

NOTICE TO DOG OWNERS

Dog License fees are payable in full to the City of Hudson. Fill in the above information to accompany dog license payments. **Presentation of a current rabies vaccination certificate is required.** The license year is January 1 to December 31. **A \$5.00 penalty per dog will be assessed after April 1.**

Chapter 174 Wisconsin Statutes requires all dogs 5 months of age or older be licensed. City of Hudson Municipal Code Chapter 99-5, No cat, dog or domesticated animal shall be permitted to run at large within the City of Hudson. The owners of an animal shall promptly remove and dispose in a sanitary manner any excreta deposited by such animals upon any public or private property.



Cat License Application Form

Please complete, sign and return this form along with the appropriate fees and proof of rabies vaccination to:
 City of Hudson
 505 Third Street
 Hudson, WI 54016
Make checks payable to: City of Hudson

Owner's Name _____ Phone _____

Street Address _____

| | CAT 1 | CAT 2 | CAT 3 |
|----------------------------------|--|--|--|
| SEX(Check one per column) | <input type="checkbox"/> Male \$20.00 <input type="checkbox"/> Neutered Male \$10.00 <input type="checkbox"/> Female \$20.00 <input type="checkbox"/> Spayed Female \$10.00 | <input type="checkbox"/> Male \$20.00 <input type="checkbox"/> Neutered Male \$10.00 <input type="checkbox"/> Female \$20.00 <input type="checkbox"/> Spayed Female \$10.00 | <input type="checkbox"/> Male \$20.00 <input type="checkbox"/> Neutered Male \$10.00 <input type="checkbox"/> Female \$20.00 <input type="checkbox"/> Spayed Female \$10.00 |
| Cat Name | | | |
| Color | | | |
| Breed | | | |
| Date Vaccinated | | | |
| Veterinary Clinic | | | |
| Vaccine Mfg. Name | | | |
| Vaccine Serial Number | | | |
| Vaccine Expiration Date | | | |

(Signed) _____

| For Staff Use Only | | | |
|--------------------|--------------|--------------|--------------|
| Tag # | Tag # | Tag # | Paid: |

NOTICE TO CAT OWNERS

Cat License fees are payable in full to the City of Hudson. Fill in the above information to accompany Cat license payments. **Presentation of a current rabies vaccination certificate is required.** The license year is January 1 to December 31. **A \$5.00 penalty per Cat will be assessed after April 1.**

City of Hudson Municipal Code Chapter 99-5, No cat, Cat or domesticated animal shall be permitted to run at large within the City of Hudson. The owners of an animal shall promptly remove and dispose in a sanitary manner any excreta deposited by such animals upon any public or private property.