



Town of West Stockbridge
Town Clerk's Office
Dog License Application

Please return the completed application with payment to the
Town Clerk's Office
PO Box 163 21 State Line Road
West Stockbridge, MA. 01266

You must submit a copy of a valid rabies certificate(s) with this application

Owner: _____

Address: _____

Telephone: _____ Is it unlisted?: Y / N Email: _____

DOG # 1

Male _____ Female _____ Neutered _____ Spayed _____

Dog's Name: _____

Breed: _____

Color[s]: _____

Age: _____

Vet. Name: _____ Ph. #: _____

Rabies Tag#: _____ Expiration Date: _____

DOG # 2

Male _____ Female _____ Neutered _____ Spayed _____

Dog's Name: _____

Breed: _____

Color[s]: _____

Age: _____

Vet. Name: _____ Ph. #: _____

Rabies Tag#: _____ Expiration Date: _____

All dogs, six (6) months and older, in the Town of West Stockbridge must be registered with the Town Clerk's Office by April 1st of the current year.

**Fee Schedule: Male / Female \$12.00 or Spayed / Neutered \$6.00
ENCLOSE FEE with APPLICATION**