

Pet Application

Lot Holders Street &	Lot #
Lot Holders Name	
Pet Type (only cats &	dogs allowed)
Pet's Date of Birth	Breed
Description (i.e., colo	r, markings)
Current Weight	lbs. Expected weight when fully-grownlbs.
•	nimal? \square NO / \square YES, a medical doctor must complete a Service Animal Verification. A service one that assists, supports or provides service to a person with disabilities. One example is a guide n.
Vaccination: Dogs an turned in with this ap	d casts must have current vaccinations including rabies. A copy of these vaccinations must be plication.
Dog License: A dog m turned in with this ap	nust be licensed and must wear its metal license tag when in public. A copy of this license must be plication.
	ay be held liable for any injuries to people or damage to property caused by an animal that I own, intained on or visits my lot.
statements or violation	have no other dogs or cats that I have not registered. I understand that the filing of false on of NEO Retreat Center pet rules may subject me to service charges, exclusion of the pet from the property, or may cause possible termination of my lease.
If a pet becomes an is registration at any tin	ssue after it has been registered, the NEO Retreat Center reserves the right to revoke this ne.
	vice Animal must be registered with the NEO Retreat Center on a yearly basis. If you remove the a new one, you must register the new one as well.
Print Name	
Signature	Date Signed
FOR OFFICE USE ON	ILY:
Date Received	Vaccination Records □ Dog License Records □