



Fremont County Extension Office
 615 Macon Ave., LL10
 Canon City, CO 81212
 719-276-7390

Fremont County Dog ID Form

Due by 5:00 p.m. on May 1, 2017

Member Name _____ Club _____

Email _____ Contact Phone Number _____

Turn in completed form one per dog. Include Veterinarian Immunization Record and pictures of the dog front and side view.

Tag: _____ Call Name of dog: _____

Colors And Markings: _____

Birthdate (mm/dd/yyyy): _____

Breed: _____ Other Breed: _____

Registered: Yes _____ No _____ Registered Name: _____

Association Registered with (AKC,, UKC, etc.): _____

Sex: Male _____ Female _____ Spayed or Neutered: Yes _____ No _____

Height at Withers in inches: _____ Weight in pounds: _____

Dog License #: _____ Tattoo or Microchip: _____

List any unusual markings or permanent conditions: _____

Rabies Tag Number: _____ Rabies Revaccination Date (mm/dd/yyyy): _____

Rabies Vaccination good for 1 year _____, 2 years _____, 3 years _____

Parvo Vaccination good for 1 year _____, 2 years _____, 3 years _____

Reminder: Documentation requirements to be attached are Veterinarian Immunization Record or vaccine lot #, serial # if injections were done at home and pictures of the dog front and side view.