

***** SEASHORE POINT *****
PET REGISTRATION FORM

All information reported will be kept in strictest confidence and is for association records only.
This form must be returned within 7 days to The Dartmouth Group, 4 Preston Court, Suite 101, Bedford, MA 01730

Unit Address: _____

Name(s) of Unit Owner(s): _____

Name(s) of Tenants (If applicable): _____

Number of Pets Residing at Unit: _____

*Please use reverse side or attach another piece of paper
if reporting information on more than two pets*

	Pet #1:	Pet #2:
Type of Pet:	_____	_____
Name of Pet:	_____	_____
Age of Pet:	_____	_____
Breed:	_____	_____
Size/Weight:	_____	_____
Color:	_____	_____
License #:	_____	_____
Rabies Vac# & Expiration date:	_____	_____

I/ We have read the Rules and Regulations pertaining to pets and agree to abide by them at all times.

(Unit Owner Signature)

(Unit Owner Signature)

(Tenant Signature)

(Tenant Signature)

