

# SOUTH HERO 2023 RABIES CLINIC PREREGISTRATION FORM

**SUNDAY MARCH 26<sup>TH</sup> 12-2 AT THE SOUTH HERO FIRE and  
RESCUE BUILDING Preregistration required.**

Please complete this form, send a printed copy with payment to SHVFD,  
Box 112, SH, VT 05486 or drop off at South Hero Town Hall along with  
payment of \$20. One form per animal.

**Owner's Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

**Species:** Dog Cat Other (Circle One)

**Sex:** Male Female : Neutered/Spayed YES NO

**Age:** 3 mo-12 mo. 12 mo. or older (Circle One)

**Size:** Under 20 lbs. 20-50 lbs. Over 50 lbs. (Circle One)

**Breed** \_\_\_\_\_

**Name** \_\_\_\_\_

**Color** \_\_\_\_\_

**DATE OF LAST RABIES VACCINATION** \_\_\_\_\_

## **IMPORTANT:**

Please bring proof your cat/dog has had a previous rabies shot in order to  
receive a 3 year shot otherwise your animal will receive a one year shot.