

INSTRUCTIONS FOR UPDATING INFORMATION ON FRONT OF THIS FORM

- VOTER:** If an " * " appears in this column you are a registered voter in Medway.
- NAME:** Check names for any spelling errors or changes.
- DATE OF BIRTH:** If your date of birth is incorrect, please make appropriate changes.
- OCCUPATION:** Please list job title, or type of work.
- VETERAN:** Place a "Y" in the column if you are a U.S. Veteran.
- NATIONALITY:** If you are not a citizen of the United States, please enter the country from which you have citizenship.
- MOVED or DECEASED:** Put a line through the person's name and enter an "X" MOVED or an "X" DECEASED. If the person has **moved** enter the new address in the block below.

DOG LICENSE REMINDER



DON'T FORGET TO LICENSE YOUR DOG FOR 2024!!!
****PLEASE NOTE CHANGE IN FEE PRICE BELOW!!!!!!****
If you have any questions, please contact:
Medway Town Clerk's Office @ (508) 533-3204 or
townclerk@townofmedway.org

While using your cell phone camera hover over the QR code and click the link that appears on your screen – that will take you to the dog licensing website

2024 DOG LICENSE RENEWAL / REQUEST FORM

Registration Period is JANUARY 1, 2024 – MARCH 31, 2024

_____ I no longer have a dog(s) (please check and list dog's names(s) below ↓)

In order to license your dog(s), we need:

1. A copy of a valid rabies certificate and certificate of spaying / neutering.
- 2a. **A fee of \$15.00 per dog if your dog has -not- been spayed or neutered.**
- 2b. **A fee of \$10.00 per dog for a spayed or neutered dog.**
3. This form filled out with your dog(s) information.

Dog 1	_____
Dog 2	_____
Dog 3	_____

Please complete the information below and include your payment and a self-addressed stamped envelope with the census form in the provided envelope. Checks are to be made payable to the Town of Medway. As a reminder, all dogs must be registered by March 31, 2024. Late fees go into effect April 15, 2024, dogs licensed after that date will be assessed a **late fee of \$50.00 per dog**. The late fee shall be in addition to the license fee indicated above.

Name of Owner: _____

Address: _____ Telephone: _____ Email: _____

Dog 1
Name: _____
Breed: _____ Color: _____
Sex: _____ Age: _____ Spayed/Neutered _____

Dog 3
Name: _____
Breed: _____ Color: _____
Sex: _____ Age: _____ Spayed/Neutered _____

Dog 2
Name: _____
Breed: _____ Color: _____
Sex: _____ Age: _____ Spayed/Neutered _____

Dog 4
Name: _____
Breed: _____ Color: _____
Sex: _____ Age: _____ Spayed/Neutered _____

Please remember to enclose copies of the rabies and spaying/neutering certificates where applicable. For more than 5 dogs, please include the additional per-dog information on a separate piece of paper, please note that with 5 dogs a kennel license is required.

For assistance, or if you no longer own a dog, contact the Clerk's Office at 508-533-3204 or email townclerk@townofmedway.org
This License will expire 12/31/2024.