Village of St. Louis, Saskatchewan
Dog License Application

Owner Information

Owner Name: _____

Owner Civic Street Address: _____

Owner Mailing Address: _____

Owner Phone Number: _____

Dog Information

Number of Dogs Owned: _____

Breed: _____ Names: _____

Color: _____ _____

Sex: _____ Recent Shots: _____

Age: _____ _____

Size: _____

_____ _____
Date of Application Signature of Applicant

For Office Use: Dog Tag License No.(s**)** _____

_____ Female(s) @ $10.00 = _____

_____ Male(s) @ $10.00 = _____

TOTAL _____