

Dog License Application

Please complete the form below and enclose with:	Send to:	Town of Morgan- Treasurer
Payment made to the Town of Morgan		3276 County Rd C
 Copy of Rabies Vaccination Certificate(s) 		Oconto Falls, WI 54154
 Self- addressed stamped envelope for tag(s) 		
	For Questio	ns Call: 920-846-0699
Owner's Name:		
Address (no PO Box):		
Phone Number:		

				Please check all that apply.				
Name of Dog	Breed	Color	Date of Last	\$8.00	\$3.00	\$8.00	\$3.00	\$35.00
			Rabies Vaccine	Male	Neutered	Female	Spayed	Kennel