

Cranbury Township Rabies Clinic Registration (one form per pet)

Owners name (first, last) _____

Address (Street, Town, Zip) _____

Phone Number _____

Email Address _____

Dog's name _____ **Predominant Colors / Markings** _____

Sex (check box) ☐ male ☐ female **Neutered/Spayed** (check box) ☐ yes ☐ no__

Dog's predominant breed _____

Weight (check box) ☐ under 20 pounds ☐ 20-50 pounds ☐ over 50 pounds

Please email this completed form to Scout Beyer at sbeyer@cranbury-nj.com to be registered. You will then receive an appointment time.

FEW REMINDERS:

Please **NO CATS** at this clinic.

Please keep your dog on a leash and at a safe distance from other dogs.

If your dog has had a previous rabies vaccine **BRING PROOF OF PRIOR VACCINATION** (a rabies certificate, township license or receipt from a veterinarian listing a rabies vaccine).

****We do not recommend bringing your dog to a vaccine clinic if he/she has underlying health issues that make vaccination advisable to be done in a veterinary hospital setting. ****