



VILLAGE OF RIVER FOREST
400 Park Avenue, River Forest, Illinois 60305
Phone: 708-366-8500 Fax: 708-366-3702

DOG & CAT LICENSE APPLICATION

Must Be Submitted with \$10 Payment and Rabies Certification

Owner's Name _____ **Date** _____

Owner's Address _____

Phone _____

Email _____

Pet

Dog

Cat

Male

Female

Color _____

Breed _____

Name _____

Vaccination Number _____

Vaccination Date _____

Vaccination Expiration Date _____

RETURN APPLICATION, RABIES CERTIFICATE AND APPLICATION FEE TO:

**Village of River Forest
400 Park Avenue
River Forest, IL 60305**

Office Use Only:
License# _____
Expires April 30, 20

Office Use Only:
Fee: \$10.00
_____ Cash
_____ Check
_____ Credit