



Cat Registration

Application for Registration

(Cat Act 2011)
 Memorial Park, Bay View Terrace, Mosman Park WA 6012
 PO Box 3 Mosman Park WA 6912
 T: (08) 9384 1633 F: (08) 9384 3694 Mon - Fri 8:30am to 4:30pm

This Cat Registration is valid until
31 October 20_____ or Lifetime

Fees Payable (Please tick one)	1 Year	3 Years	Lifetime
	<input checked="" type="checkbox"/> \$20.00	<input checked="" type="checkbox"/> \$42.50	<input checked="" type="checkbox"/> \$100.00
Pensioners: 50% of above fees (proof of pension to be produced)			

Owner Details

Full Name:

Residential Address: (No PO Boxes accepted)

Postal Address: (If different from above)

DOB of Owner: (Required by Law)
 DD / MM / YYYY

Phone: (Day Time)

Phone: (Mobile)

Pension Details: (Proof Required)

Email Address:

Cat Details

Tag No: (Issued by the Town) **Cat's Name:**

Cat's DOB DD / MM / YYYY **Cat Sex:** Male Female

Cat's Breed

Cat's Colour / Features or Marks

No. of Cats on Property:

Microchip Number:

Microchip Database Company:

Is the Cat Sterilised? (Proof Required)
 Yes No

If NO, is the exemption granted by a Vet?
 Yes No

Proof Required, attach details of exemption granted by Vet

Required Information

Emergency Contact Name (Other Than Owner):

Emergency Contact Phone:

Declaration

The Town of Mosman Park may refuse an application if any or all of the required information is not provided within the time period specified in the legislation.

I, (Print Full Name)

Of (print full address)

Declare that the information I have provided is true and correct. I am aware that it is an offence to provide false and misleading information to the Town of Mosman Park

Signature: Date: DD / MM / YYYY

Payment Methods

Payment in person:
 Return this form intact, completed and together with copies of proof of required documentation to the cashier at the Town's Offices between the hours of 8.30am – 4.30pm Monday to Friday:
 Memorial Park, Bay View Terrace.
 Mosman Park WA 6012

Payment via post:
 Return this form intact, completed and together with copies of proof of required documentation with a cheque or money order, crossed Not Negotiable, payable to:
 Town of Mosman Park
 PO Box 3
 Mosman Park WA 6912

Payment using Credit Card:

Card Number:

Card Type:

Payee Name:

Expiry Date: MM / YY

Payment Amount: \$

I authorise the Town of Mosman Park to process the above amount from my account for the purpose of registration for my animal.

Signature: