

Dog License

Please print out this form and return to:

Worcester City Clerk
City Hall Room 206
455 Main Street
Worcester, MA 01608-1889

Owner information:

Name of owner

First	Middle	Last
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Residence

Number & Street	Apt #	Zip
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Home Phone	Secondary Phone
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Date of Owner's Birth

Month	Day	Year
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Dog Information:

Name of Dog

Sex _____

(Male? If neutered, please provide veterinarian certificate)

(Female? If spayed, please provide veterinarian certificate)

Color/s

Breed/s

Date of animal's Birth

Month

Day

Year

Please include the anti-rabies vaccination from your veterinarian.

Annual License Fee:

Make check payable to **City of Worcester**

Male **\$30.00**

Female **\$30.00**

Neutered Male **\$25.00**

Spayed Female **\$25.00**

Any person who fails to obtain an annual dog license on or before May 31st shall be charged when applying for a license, in addition to the license fee, a late fee of **\$15.00**.

[Print Form](#)