

Registration Form – Babergh			
Dogs Name:			
Breed:			
Owners Name:			
Address:			
Tel No:			
Mobile No:			
Email address:			
I understand that I will be sent updates relevant to 'Paws on Patrol' and my area from Police Direct and I would like to receive my updates via my MOBILE/EMAIL. (Please delete as appropriate)			
Name and address of vet surgery you are registered with:			
Please confirm the following by entering YES in the boxes below:			
1. My dog is vaccinated			Vet stamp to confirm 1 & 2:
2. My dog is micro-chipped			
3. I clear up my dogs mess			
4. My dog wears a collar and name tag in public			
5. I do not allow my dog to cause annoyance to other persons/neighbours			
I would like to be part of the 'Paws on Patrol' initiative in Babergh Suffolk and I will be the 'eyes and ears' of my community whilst I am walking my dog.			
I confirm that I have answered YES to points 1 – 5 above and my vet has stamped this form to confirm points 1 and 2.			
Signed:			
Dated:			
Please send the completed form to: Pc 379 Deborah Tyrrell, Babergh East SNT, Police			





