

# TOWN OF MEDINA APPLICATION FOR NEW DOG LICENSE

All dogs five months or older must be licensed and have current rabies vaccination as required by State Law. Dogs must be licensed by **May 1<sup>st</sup>**; a \$20.00 late fee per dog per month or part of month will be assessed if not licensed by May 1<sup>st</sup> of the current year. Failure to have a current license for your dog may result in significant fines and penalties. **IF YOU HAVE RENTERS, PLEASE BE SURE TO NOTIFY THEM OF THESE LICENSING REQUIREMENTS.**

Licensing Fees per dog are: \$20.00 if spayed or neutered  
\$25.00 if not spayed or neutered  
Kennel License \$60.00 up to 12 dogs and \$20.00 per dog after 12 dogs

Please provide the following information and return it to the town with your check payable to the **Town of Medina. Please mail to : Town of Medina, PO Box 37, Marshall WI 53559-0037 with a Self-addressed stamped envelope included.**

**A current rabies certificate from your veterinarian must be supplied if the date is expired or for new dog licenses.**

Owner Name: \_\_\_\_\_  
Owner Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
LIC# \_\_\_\_\_ assigned by clerk/treasurer.

## DOG APPLICATION

Please Circle:

Dog Name: \_\_\_\_\_ Neutered Spayed Male Female  
Color: \_\_\_\_\_ Rabies Exp: \_\_\_\_\_  
Breed: \_\_\_\_\_ LIC # \_\_\_\_\_ assigned by treasurer.

---

## Town of Medina Dane County Wisconsin Dog License Receipt

The required fee of \$\_\_\_\_\_ having been paid to the undersigned clerk/treasurer is assigned the license number of\_\_\_\_\_. The license is valid from January 1<sup>st</sup>, 2026, until December 31<sup>st</sup>, 2026, for the owner identified below to keep the dog or dogs listed below within the boundaries of the Town of Medina.

Owner Name: \_\_\_\_\_  
Owner Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Dog Name: \_\_\_\_\_ Neutered Spayed Male Female  
Color: \_\_\_\_\_ Rabies Exp: \_\_\_\_\_  
Breed: \_\_\_\_\_

Received by: \_\_\_\_\_ on \_\_\_\_\_.