



**VOTER:** If an asterisk \* appears in this column you are a registered voter. If nothing is listed, you are not a registered voter in Maynard. Returning your census keeps your voter status active.

**NAME:** Check names for any spelling errors or changes.

**DATE OF BIRTH:** If your date of birth is incorrect, please make appropriate changes.

**VETERAN:** Place a 'Y' in the Veteran column if you are a U.S. Veteran.

**OCCUPATION:** Please list job title, not place of employment.

**MOVED or DECEASED:** Put a line through the person's name and enter an 'M' or a 'D'. If the person has moved, enter the new address in the next available line. The moved person must also sign a form.

**NATIONALITY:** If you are not a citizen of the United States, please enter the country from which you have citizenship.

To register to vote or change your party enrollment you must complete a NEW VOTER REGISTRATION FORM in person, by mail, by the QR code on the right or online at: [www.RegisterToVoteMA.com](http://www.RegisterToVoteMA.com)



If you have any questions, contact the Town Clerk's office at [clerk@townofmaynard.net](mailto:clerk@townofmaynard.net) or (978)-897-1300.

## 2024 DOG LICENSE APPLICATION

### COMPLETE THIS FORM ONLY IF REGISTERING BY MAIL

- If you no longer own a previously registered dog, you must notify the Town Clerk's office to avoid future late fees and fines.
- Dog Licenses will not be processed without a current rabies certificate. Applications and fees will be returned if rabies certificate is expired and could result in additional late fees and/or fines.
- Dogs licensed on or after March 1st will be assessed a \$25.00 late fee.
- Tags and licenses will be mailed for those who provide a self- addressed stamped envelope.

Make check payable to the **Town of Maynard** and include a self-addressed, stamped envelope.

### DOG LICENSE FEES

<b>Spayed/Neutered</b>	<b>Intact</b>	<b>Owners- Age 70+</b>
<b>\$10.00</b>	<b>\$15.00</b>	<b>No Fee</b>

Name of Owner

Mailing Address

Email Address

Phone Number

Veterinarian Office Name

Veterinarian Phone Number

### Dog # 1

Name	Breed	<input type="checkbox"/> Male \$15
		<input type="checkbox"/> Neutered \$10
		<input type="checkbox"/> Female \$15
		<input type="checkbox"/> Spayed \$10
Color	DOB	<input type="checkbox"/> No Longer own
	Rabies Exp.	

### Dog # 2

Name	Breed	<input type="checkbox"/> Male \$15
		<input type="checkbox"/> Neutered \$10
		<input type="checkbox"/> Female \$15
		<input type="checkbox"/> Spayed \$10
Color	DOB	<input type="checkbox"/> No Longer own
	Rabies Exp.	

### Dog # 3

Name	Breed	<input type="checkbox"/> Male \$15
		<input type="checkbox"/> Neutered \$10
		<input type="checkbox"/> Female \$15
		<input type="checkbox"/> Spayed \$10
Color	DOB	<input type="checkbox"/> No Longer own
	Rabies Exp.	

### Dog # 4

Name	Breed	<input type="checkbox"/> Male \$15
		<input type="checkbox"/> Neutered \$10
		<input type="checkbox"/> Female \$15
		<input type="checkbox"/> Spayed \$10
Color	DOB	<input type="checkbox"/> No Longer own
	Rabies Exp.	



[www.townofmaynard-ma.gov](http://www.townofmaynard-ma.gov)