

**PRINCESS ANNE GARDENS CONDOMINIUM ASSOCIATION  
PET REGISTRATION REQUEST FORM**

DATE OF REQUEST \_\_\_\_\_

PLEASE RETURN THIS FORM TO: Princess Anne Gardens Condominium  
Association  
525 South Independence Blvd., Suite 200  
Virginia Beach VA 23452

PLEASE CHECK ONE:

CAT \_\_\_\_\_ DOG \_\_\_\_\_ OTHER \_\_\_\_\_ BREED: \_\_\_\_\_

WEIGHT \_\_\_\_\_ DESCRIPTION: \_\_\_\_\_

OWNER: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NAME PET ANSWERS TO: \_\_\_\_\_

DATES AND REGISTRATION # OF RABIES INNOCULATION:

By registration of my pet, I acknowledge the pet policies set forth in the rules and regulations and agree to abide by same. I understand that my pet may not be over 25 lbs, unless approved by the Board of Directors of Princess Anne Gardens Condominium Association.

PET OWNER'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

PLEASE ATTACH PHOTOGRAPH  
OF PET HERE!

THANK YOU!