

Voice and Sight Tag Registration

*** Required Information**

Primary member:

* **First Name** _____ Middle Initial _____ * **Last Name** _____

* **Date of Birth** ____ / ____ / ____ mm/dd/yyyy

Mailing Address: (where to send the registration tags)

* **Street address** _____

Apt, suite, etc. _____

* **City** _____ * **State** _____ * **Zip Code** _____

I have watched the video _____ (Signature)

I agree to the terms of Voice and Sight Control _____ (Signature)

See terms on back of this page

I am 18 years or older _____ (Signature)

The first member to register must be over 18 years old

How can we contact you?

Daytime phone number _____

E-mail address _____

#1 Additional household member:

* **First Name** _____ Middle Initial _____ * **Last Name** _____

* **Date of Birth** ____ / ____ / ____ mm/dd/yyyy

I have watched the video _____ (Signature)

I agree to the terms of Voice and Sight Control _____ (Signature)

#2 Additional household member:

* **First Name** _____ Middle Initial _____ * **Last Name** _____

* **Date of Birth** ____ / ____ / ____ mm/dd/yyyy

I have watched the video _____ (Signature)

I agree to the terms of Voice and Sight Control _____ (Signature)

#3 Additional household member:

* **First Name** _____ Middle Initial _____ * **Last Name** _____

* **Date of Birth** ____ / ____ / ____ mm/dd/yyyy

I have watched the video _____ (Signature)

I agree to the terms of Voice and Sight Control _____ (Signature)

----- For Office Use Only -----

Date _____ Initial _____

Registration Fee: \$15.00 Boulder resident

(one tag included with fee) \$18.75 Non-resident

Registration Fee: _____

Additional

Dog Tag(s): \$ 5.00 Each

Tag(s): __ x \$5.00 _____

Cash TOTAL _____


Check # _____ (Make check payable to: City of Boulder – OSMP)

Mail to: City of Boulder – OSMP, PO Box 791, Boulder, CO 80306

* Charge # _____ * CVV code _____ * Expire date: _____

Tags: # _____ # _____ # _____ # _____ # _____

Please allow 5 to 7 business days for delivery. For assistance: weekdays, 8am – 5pm

 303.441.3440

Terms and Conditions of Voice and Sight Control

Before voice and sight control tags can be purchased, dog guardians must certify, under penalty of perjury, the following:

- The dog guardian has watched the video presentation on voice and sight control prepared by the City of Boulder, and;
- The dog guardian agrees to control any dog without a leash on City of Boulder voice and sight control areas in the manner described in the video presentation on voice and sight control of a dog.

I, and additional members of my household agree to the terms and conditions and wish to register on-line. If the dog guardian does not agree to the terms and conditions of the voice and sight control program, the dog guardian may not register for the program.