



PERMIT #(s):

PUTNAM COUNTY VETERANS MEMORIAL PARK ANNUAL PERMIT REGISTRATION

PLEASE PRINT LEGIBLY

LAST NAME FIRST NAME DATE OF BIRTH

STREET ADDRESS

TOWN STATE COUNTY ZIP CODE

TELEPHONE EMAIL

VEHICLE INFORMATION

MAKE MODEL COLOR LICENSE PLATE #

ADDITIONAL VEHICLE (2nd Permit)

MAKE MODEL COLOR LICENSE PLATE #

I HAVE FILLED OUT DOG PARK MEMBERSHIP FORM & SIGNED RELEASE AND HOLD HARMLESS AGREEMENT: YES: [ ] NO: [ ]

I CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND I WILL FOLLOW THE RULES AND REGULATIONS OF PUTNAM COUNTY VETERANS MEMORIAL PARK.

DATE: SIGNATURE:

FOR OFFICIAL USE ONLY: INITIALS: PROOF OF RESIDENCY OR PROPERTY OWNERSHIP: PAYMENT TYPE: CREDIT CARD [ ] CASH [ ] CHECK [ ] AMOUNT PAID: \$ DOG PARK TAG #(S) TYPE OF PERMIT(S) ISSUED: RESIDENT [ ] 2ND RESIDENT [ ] SENIOR [ ] 2ND SENIOR [ ] NON-RESIDENT [ ] DOG PARK [ ] COUNTY EMPLOYEE/1ST RESPONDER [ ]