

PROGRAM PARTICIPANT PET REGISTRATION / APPROVAL	
Name of Program Participant(s) (as on Program Agreement):	Property Reference: Dev.: AB Reference #:
Address:	
Type of Pet: <input type="checkbox"/> Cat <input type="checkbox"/> Dog Age of Pet (at registration): Name of Pet:	Emergency Contact Person (who will care for Pet): Name: Address: Home Phone: Cell Phone:
Physical Description of Pet:	
Veterinarian's stamp here confirming that pet is spayed or neutered.	STAPLE PHOTOGRAPH OF PET HERE
PROGRAM PARTICIPANT'S DECLARATION	BC HOUSING APPROVAL
I agree to abide by the BC Housing Pet Ownership Rules (sample attached). _____ Program Participant Signature _____ Date	I hereby grant approval to keep the Pet described above. _____ BC Housing Signature _____ Date