



Condominium Trust / 42 Eighth Street / Charlestown / MA 02129 / tel. 617.952.0108 / www.parrislandingcondominium.com

Pet Registration

Do you have a pet? YES _____ NO _____

If no, please skip to the signature line at the bottom of the page.

If yes, please complete the information requested below.

TYPE OF PET	_____	_____
BREED	_____	_____
SEX	_____	_____
WEIGHT	_____	_____
COLOR	_____	_____
NAME	_____	_____

PLEASE ATTACH A PICTURE OF YOUR PET(S) TO THIS FORM.

Pictures are very helpful in the event your pet becomes lost on the property.

The Management can assist you in taking digital pictures of your pet(s).

I/WE UNDERSTAND AND AGREE TO ABIDE BY THE GUIDELINES REGARDING THE KEEPING OF PETS.

Signature _____

Signature _____

Unit _____

Date _____