



TOWN OF NORTHBOROUGH BOARD OF HEALTH

Town Hall Offices • 63 Main Street • Northborough, MA 01532 • 508-393-5009 • 508-393-3130- Fax

REGISTRATION OF HORSE(S)

Date: _____

Owner Name: _____

Address: _____

Phone Number: _____

Emergency Contact Information: _____

Veterinarian Information: _____

Total Number of Horses on Property: _____

Do you have any other animals' onsite? _____

Please list the name, age and give a brief description of each of your horses:

Please complete this form and return it to the Board of Health office with the application and fee (if applicable).

Signature of Applicant

Date