



CITY OF AMES DOG PARK PAYMENT FORM

Name: _____

Ad	dress:			
	y/State:			
Phone:		Email:		
	me of Dog(s)			
INC	The or bog(s)			
	2025 Annual Pass Fees	First Dog	Additonal Dog	
	Resident* January - December	\$ 64.00	\$ 32.00	
	Resident* April - December	\$ 50.00	\$ 25.00	
	Resident* July - December	\$ 34.00	\$ 17.00	
	Non Resident January - December	\$ 80.00	\$ 40.00	
	Non Resident April - December	\$ 66.00	\$ 33.00	
	Non Resident July - December	\$ 50.00	\$ 25.00	
Please	please indicate below if you want to renew renew and update the additional mobile us Phone:	er to access in 2025	,	12.00.
•	add an additional HID Mobile Access to yo elow. This is a person who would not have		-	•
I would	like to add a <u>new</u> HID phone access for the	e \$12.00 yearly app f	ee.	
Name:	Phone:	Emai		
			Email must be unique to thi	s user/phone #
Total Amount	Due: \$			
Credit Card N	umber #		_Expiration Date/_	mm/yy
ZIP	CVV			
Dog Owner S	ignature:			