



Animal Name: _____

A-Code: _____

Date: _____

Owner Surrender Form

Owner Information

First Name: _____ Last Name: _____

Mailing Address: _____ City: _____

State: _____ Zip: _____ Phone Number: _____

Email Address: _____

Are you the legal owner of this animal? **Yes No**

If no, provide the name & phone number of the legal owner: _____

Can anyone else claim ownership (ex-spouse, parent, child)? **Yes No**

If yes, provide name and phone number: _____

Pet Information

Name: _____ Age: _____ Breed: _____

Spayed/Neutered? **Yes No** Up To Date (UTD) on Vaccinations? **Yes No** Microchipped? **Yes No**

UTD on Flea/Tick Preventatives? **Yes No** UTD on Heartworm Preventatives? **Yes No**

Litter: **Kittens Puppies** Age: _____ # in Litter: _____ Breed: _____

Veterinarian Contact Information: _____

How long have you had this animal? _____

How did you acquire this animal? _____

If from another shelter, provide the shelter name and location: _____

Why are you surrendering this animal? _____

Have you surrendered a pet in the past? **Yes No** If yes, why? _____

Does this animal have a bite record? **Yes No** If yes, please explain: _____

Any medical problems? _____

Any known allergies? _____

Does this animal have any behavioral problems? _____

Does this animal have "prey drive" or ever attacked another animal (chickens, cats, dogs)? **Yes No**

If yes, please explain: _____

Does this animal co-exist with dogs? **Yes No** Cats? **Yes No**

Does this animal co-exist with children? **Yes No** If yes, ages? _____

Is this animal potty trained? **Yes No** Is this animal crate trained? **Yes No**

Does this animal ride well in a car? **Yes No** Does this animal walk well on a leash? **Yes No**

Does this animal require a fenced-in yard? **Yes No** Can this animal scale/climb a fence? **Yes No**

Primarily inside or outside? _____ Does this pet like to swim? **Yes No** Hunt? **Yes No**

Does this animal do well with medical examinations/vaccinations? **Yes No**

Grooming/nail trim? **Yes No** Does this animal bark/meow often? **Yes No**

What tricks/commands does this animal know? _____

Type/Amount/Frequency you feed your pet: _____

Is there anything that makes this pet nervous (men, loud noise, etc) _____

Please continue to Page 2.

By signing below, you are releasing all ownership of animal described above including but not limited to previous medical records.

I acknowledge that I have read, understand, and agree to the following statements: *(please initial)*

_____ There is not a bite record for the animal(s).

_____ The animal(s) has/have not been deemed dangerous by any agency of the state, county, municipality, or other governmental subdivision of the state which is responsible for animal control operations in its jurisdiction.

_____ To the best of my knowledge no other person has the right to property on the animal(s) and there are no legal disputes over the custody of the animal(s).

_____ I relinquish all rights of ownership to the animal(s).

_____ Should I decide I want the animal(s) back, I will be required to go through the adoption process and pay the fees required for the adoption(s), even if it is the day after surrendering the animal(s).

_____ I understand that Paws+Claws Rescue & Resort reserves the right to refuse any adoption.

****In order to help with the medical and day-to-day care of your animal(s) a donation is greatly appreciated.***

Donation Amount: \$ _____

Payment Method: Cash _____ Credit Card _____ Check # _____

Surrender Signature: _____ Date: _____

Paws+Claws Staff Signature: _____ Date: _____

Please write a short biography for your pet that would help him/her get adopted like favorite things to do, toys they like to play with, cuddling, etc.

[illegible]