



Pets Return Home
PO Box 2769
Cottonwood, AZ 86326
(928) 793-2013

www.petsreturnhome.org

OWNER SURRENDER

adoption@petsreturnhome.org

ANIMAL IDENTIFICATION

Dog's Name _____ Date of Birth: _____ Age: _____
Spayed/Neutered: _____
ID Number: _____ Male: Female: Yes No

MEDICAL INFORMATION

Veterinarian Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
Heartworm Preventative: Yes No Last Preventative: _____
Current Rabies Vaccination: Yes No Last Rabies Vaccine: _____
Current DHLPP: Yes No Last DHLPP: _____
Current Bordetella: Yes No Last Bordetella: _____
Microchip: Yes No Microchip Number _____
Microchip:Company: _____
Brand of Dog Food: _____ Last Preventative: _____
How Often Fed: Once Daily Twice Daily Free Fed Other: _____

ANIMAL CARE

RELEASE OF OWNERSHIP

_____ I affirm that I am the sole and only legal owner of this dog and that I am legally entitled to transfer his/her ownership.

_____ I have carefully considered my decision to surrender this dog and affirm that I believe that it is in the dog's best interest to do so.

_____ I affirm that this surrender decision is made entirely voluntarily, without any outside influences whatsoever from any source including Pets Return Home.

_____ I understand that by signing this form, I permanently surrender legal ownership of this dog to Pets Return Home.

_____ I understand that in order to allow this dog to bond successfully with a new family, I may have no future contact with him/her.



Pets Return Home
PO Box 2769
Cottonwood, AZ 86326
(928) 793-2013

www.petsreturnhome.org

OWNER SURRENDER

adoption@petsreturnhome.org

I agree and understand that I am giving up all rights of possession and ownership of this dog and that I will not be able to redeem said dog at any time nor will I be allowed to know the dog's whereabouts. I agree and understand that said dog is now "sole property" of Pets Return Home. I promise that the information that I am giving is accurate and that Pets Return Home will not be held liable or chargeable for any false information or any misrepresentation that I may have submitted on this form. I also sign this owner surrender agreement honestly and state truthfully that this animal has never bitten any human being.

SURRENDERING OWNER INFORMATION

Signature	Printed Name	Date
-----------	--------------	------

Pets Return Home Signature	Printed Name & Title	Date
----------------------------	----------------------	------

Street Address: _____ City: _____

State: _____ Zip: _____

Phone Number: _____

Driver's License Number: _____ Issuing State: _____

Date of Birth: _____