

DOG SURRENDER RECORD

Date _____ Dog's Name _____

Breed _____ (Male / Female) Desexed (Yes/No)

Age _____ Colour _____ Markings _____

Temperament _____

Fears/Dislikes _____

Has the Dog been around and exposed to the following:

Men _____ (Yes/No) _____

Women _____ (Yes/No) _____

Animals _____ (Yes/No) _____

Children _____ (Yes/No) _____

Micro-chipped (Yes/No) _____ Registered (Yes/No) _____

VETERINARY HISTORY

Vaccination Description _____ Next Due Date _____

Wormed (Yes/No). Date? _____ Next Due Date _____

Wormed. Date? _____ Next Due Date _____

Flea Treatment Date? _____ Next Due Date _____

Flea Treatment Date? _____ Next Due Date _____

Treatments/Operations _____

Reason for Surrender _____

Impound Number _____

Surrender Fee _____ Paid (Yes / No) Receipt No. _____

Other Donation Made _____

DECLARATION BY OWNER

I, being the named owner of the above dog, hereby sign the animal over to the Refuge to be adopted or otherwise dealt with at the Refuge's absolute discretion.

Name _____ Telephone _____

Address _____

Signed _____ D.L.No. _____

