Top of Form

**SRNE Surrender Form**

Please fill out this application as completely as possible. Please be honest.

* **If you are looking to re-home or surrender your Shiba please fill out the following form. Please note that this is all volunteer organization. We are limited in the number of the Shibas we can foster and that space may not be available.**
* **Personal / Family Information**
* Name \* First Last
* Address \*

Street Address City

Bottom of Form

State / Province / Region Postal / Zip Code

 Country

 Best phone to reach you at (with area code) \*



 Work phone (with area code) \*



 Email \*



** Dog Information**

  Gender

Male Female

 Age



 Name of your dog



 Where was your dog obtained originally?



 Please check all that apply

Aggression towards other dogs Aggression towards cats Food Aggression Toy Aggression Walks on leash Crate trained House Broken Neutered/Spayed Up to date on shots Separation Anxiety Has your dog ever bitten if so check the appropriate box(s) below Bitten Humans ? Bitten other dogs ? Dog good around small children Dog on HW preventative (need proof) dog microchipped Other (specify below)

 Please describe the dog’s likes/dislikes, general daily routine, sleep location, food allergies, and anything that will facilitate our ability to find a suitable home.



 Any Medical conditions, is the dog on any medications?



 Can you hold the dog while a new home is found



 When do you need to find a new home by?



 Why do you want to give up your dog?



Please describe your dog’s personality, likes/dislikes, noise sensitivity, level of exercise needed, allergies, quirks, etc. This will help us best in placing the dog in a suitable home.

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** A surrender fee/donation is required. For dogs under 3 years it is $100, dogs over 3 years $150, dogs over 7 years are $250. The surrender fee maybe be waived if the dog is up to date on vaccinations, is spayed/neutered and on heart worm medication (proof of vaccines and spay certificate from your vet is required). My signature below certifies that I am the owner of, or have the authority to surrender to Shiba Rescue of New England, the animal described above. If SRNE accepts the dog into rescue, the undersigned relinquish all rights of ownership and any right to information on the disposition of said animal. I also authorize the release of any veterinary records regarding the animal. I certify that to the best of my knowledge I have disclosed all information about the animal concerning health, behavior, history and anything else that may affect the safe placement of the animal in a new home, and that all statements made above are true and correct.**

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Signature and Date