

BOOMER’S PLACE

A 501(c)(3) non-profit canine rescue

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| |  |  | | --- | --- | | Owner’s Full Name(s): |  | | Email: |  | | Home Address: |  | | Home Phone: |  | | Cell Phone: |  | | **PET** |  | | Name |  | | Length of ownership? |  | | Age? |  | | Dogs Birthday? |  | | Breed? |  | | Color? |  | | Gender? |  | | Spayed/Neutered? |  | | Microchipped? |  | | Where did you get the dog from? |  | | If from a breeder, is there a return clause in the Breeder's contract? |  | | What food is the dog currently on? (Please put the full name that's on the bag) |  | | How much do you feed the dog and how many times per day? |  | | **MEDICAL HISTORY** |  | | Last vaccinations? |  | | Has the dog been tested for heart worm? |  | | On a preventative? |  | | Has the dog had any illnesses or disabilities? |  | | If yes, please explain: |  | | Is the dog currently on any medication? |  | | If yes, please list any medications and/or supplements: |  | | Are you able to provide veterinary records? |  | | Last Vet visit? |  | | Name of Vet last seen: |  | | Phone Number: |  | | Address of Vet: |  | | **TEMPERAMENT** |  | | How does the dog relate to the following: |  | | Other dogs? |  | | Small dogs? |  | | Cats? |  | | Other animals? |  | | Children? |  | | Men? |  | | Women? |  | | Is the dog house-trained? |  | | Has the dog ever bitten another person or animal? |  | | If yes, please explain: |  | | Does the dog use a doggy door? |  | | Is the dog crate trained? |  | | Does the dog walk well on a leash? |  | | Does the dog ride well in the car? |  | | Is the dog primarily indoors or outdoors most of the time? |  | | Is the dog used to being around a pool? |  | | Has the dog had any formal training? |  | | If yes, please explain: |  | | Does the dog have any behavioral issues? |  | | If yes, which type: |  | | Is there anything else we should know about the dog? |  | | Please explain your reason for surrender: |  | | I certify that I have honestly answered all of the above questions. |  | | Are you able to make a donation to the Rescue to help in the care of your dog? |  | | How much are you able to donate? |  | | I hereby authorize the vet to disclose and release info to Boomer’s Place |  | |  |  | | Today’s Date: |  | | I certify that I am the legal owner of the dog described herein |  | | I understand that if I wish to reclaim this dog, I agree to undergo the same adoption requirements and approvals |  | | Owner’s Signature: |  | | Additional Owner's Signature: |  | |  |  | |