

BOOMER’S PLACE

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

Golden Valley, AZ 86413

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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: |  |
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