**Hobo Haven Pet Rescue Owner Surrender Form Pg 1 of 2**

Please help us provide great care for this animal by thoroughly completing the following information

Owner Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dog’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed (incl mixes)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: M or F

I got my dog as a puppy\_\_\_\_Adult\_\_\_\_\_\_\_\_\_\_ Where did you acquire your dog?

Have you owned the dog it’s entire life since a puppy?
Age: Date of birth if known?

Reason for Surrender:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To your knowledge has this animal bitten or showed potential to bite in the past (animals or human): Yes or No

If yes, please describe the incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Date of last vet visit: Reason for visit:
Last rabies vaccination: Last Distemper/Parvo vaccination**

**Last fecal sample test: (neg or positive?) Last heartworm test:** **(neg or positive?)**

**Is the dog on regular flea/tick/heartworm preventative?
Spayed/neutered? Date of last litter? Date of last heat cycle?**

**Does your dog live indoors/outdoors/kennel/tied out? Please clarify**

Frequency of accidents indoors: Often Occasionally Never

Is your pet crate trained? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your dog leash trained?

For how many hours at a time is he/she left at alone in a day? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My dog currently lives with: Dogs Cats Children Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How does your dog behave towards the children/ other animals it interacts with?
Please explain in detail, it will help us place your dog in the most appropriate foster home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where do you keep your dog during the day? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When left alone my dog: (Highlight all that apply) Barks Chews personal items
Scratches on doors, windows, floor etc. Urinates/defecates indoors Has separation anxiety

My dog is afraid of: (Check all that apply) Strangers Bad weather Being Left Alone Children
Vet Appointments(require muzzle?) Loud Noises Car Rides
Does your dog travel well? Anxiety? Vomiting?
What does your dog do when afraid or fearful of people/animals or situations?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My Dog knows the following basic Commands: (Check all that apply) Sit Down Heel Stay/Wait Come

Additional commands or training skills?: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe your dog’s overall personality/temperament/demeanor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My dog has the following health concerns:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My dog is currently on this medication:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other helpful information about my dog: PLEASE BE HONEST. We are not judging at all, but it is very helpful to know as much as possible about your dog in order to help them settle into the best foster placement for their individual needs \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Tell us your favourite things about your dog and what they love to do, what makes them happiest?

Tell us some of the things that your dog does that needs improvement/training or is a concern?

Authorization to release/transfer medical records: please list all vet clinics the dog has been seen at.

**TO WHOM IT MAY CONCERN: Vet clinic:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The undersigned authorizes the release of veterinary information or records relating to**

**the pet known as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, listed with this clinic under owner’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, to Hobo Haven Pet Rescue.**

Vet clinics: Please fax medical history including vaccinations, medications and all records to 519-664-3206, or email ideally to hobohavenpetrescue@gmail.com

Owner name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Witness\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Hobo Haven Pet Rescue Owner Surrender Form**

Please review and sign below acknowledging the following: The above information on page 1 reflects the animal in which I am surrendering to Hobo Haven Pet Rescue.

I am the owner of this animal and have full legal rights to surrender him/her. All questions have been answered truthfully and to my full knowledge in regards to the dog’s history and any medical/behavioural concerns.

I understand that I am surrendering ownership of this dog and that I cannot ask for this animal back after this form is signed. I agree that this animal is now under full and complete ownership of Hobo Haven Pet Rescue.

I verify that I have the legal right to surrender this dog, and I am hereby releasing all rights for this animal

to Hobo Haven Pet Rescue.

My signature below reflects that I have read and understand the information provided above.

**Dog’s Name:**

**Owner surrendering dog:
Print Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_**

Are you willing to pay a surrender fee to assist Hobo Haven Rescue with necessary vetting and supplies?\_\_\_\_\_

Surrender fee paid: Always appreciated if possible to help with vet/supply expenses.

Hobo Haven will be completed any necessary vetting including dental cleaning/surgery (Estimated at $2,000-$3500 if extractions needed), bloodwork, Heartworm testing (if positive, treatment estimate $2800), vaccination updates, and any and all necessary medical treatment including spay/neuter, testing, microchip and vaccinations.

This comes at a great cost to rescues who do not have funding and rely entirely on fundraiser events and moderate adoption fees, which do not cover the expenses association with taking in dogs to assist them.

Hobo Haven Witness:

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_