

Tall Tails Beagle Rescue

Dog Surrender Request and Contract

Upon completion of this form, please remit to:

Tall Tails Beagle Rescue

443 South Main St

Mechanic Falls, ME 04256

Or email Talltailsbeaglerescue@gmail.com

In an attempt to best asset and place your dog, please complete this form honestly and completely. This form stays with the rescue, no person information of you will be shared with any third party. Feel free to attach any additional information you may wish to share. You may include things about your dog's likes, dislikes, personality, and anything else you think we should know. You are welcome to call and inquire about your dog, but we will not share the new family's personal information. Please attach a copy of your dog's medical records, including spay/neuter certificate and rabies vaccination. Also, a couple photos of your dog would be appreciated. As we are a non-profit, we request a \$50 fee for altered or \$75 for unaltered dogs.

Owner Information:

Name: _____

Email: _____

Address: _____

Phone: _____

General Information:

Dog's Name: _____

Birthdate/Approx. age: ____ Sex: ____

Neutered/Spayed: YES/NO If Yes, date: _____ Date of last heat/litter: _____

How did your dog come to live with you: _____

How long has your dog lived with you: _____

Why are you surrendering your dog: _____

Did your dog come from a shelter/rescue/breeder? Yes/No

Have you contacted them about returning the dog? Yes/No

Why can the dog not be returned to the origin that you took possession? _____

Medical History:

Veterinary clinic: _____

Phone: _____

How does your dog behave at the vet: _____

How does your dog behave for baths/nail trimming: _____

Is there any area your dog doesn't like to be touched: _____

How does your dog react, if above answer was yes: _____

How often does your dog go to the vet: _____

Are there any medical issues known or being treated for with your dog: _____

Has your dog ever needed surgery: YES/NO If yes, please explain: _____

Is your dog currently on any medication: YES/NO If yes, please explain: _____

Is your dog on heartworm preventative: YES/NO If yes, date: _____
Is your dog on flea/tick preventative: YES/NO if yes, date: _____

Personality:

What is your dog's vocal level: Low/ Medium/ High

When is your dog most vocal: _____

Is your dog afraid of anything: _____

What is the dog's reaction when scared: _____

What are some of your dog's cute traits/habits: _____

Please circle any of the characteristics that apply to your dog:

Active Demanding Hyperactive Obedient Sensitive Affectionate Easygoing Independent
Passive Sociable Aggressive Fearful Insecure Playful Stubborn Attentive Happy Loving
Quiet Submissive Confident hardheaded Mannerly Reserved Timid Uncontrollable

What would you have liked to have changed about your dog:

Aggressiveness Chewing Fighting Raiding the garbage Barking Climbing Growling Biting
Running away Digging Jumping up Soiling Chasing Fear of noise Stealing Over-protective
Counter surfing Begging Anxiety Eating feces

What could your dog improve on to make their new home better: _____

Lifestyle/Home life:

Where does your dog spend most of the time: Indoors/ Outdoors/ Equal time

Does your dog get along well with other dogs: YES NO

How often does your dog interact with other dogs: Daily/ Weekly/ Rarely/ Never

How does your dog play with other dogs: Playful/ Rough/ Gentle/ Mouthy/ No interaction

Is your dog possessive with toys/food with people: YES NO With other dogs: YES NO

Does your dog react to cats: YES NO If yes, how: _____

Does your dog react to smaller animals: YES NO if yes, how: _____

Has your dog been around children: YES NO UNKNOWN If yes, what ages: _____

How often does your dog interact with children: Daily/ Weekly/ Rarely/ Never

Is your dog more comfortable around MEN WOMEN KIDS TEENS SENIORS ALL AGES

How does your dog react to strangers: Friendly/ Barks/ Aggressive/ Not Tolerable

Has your dog ever bitten anyone: YES NO If yes, please explain the circumstances: _____

Did the bite break the skin: YES NO
Has your dog ever bitten another animal: YES NO if yes, please explain the circumstances: _____

Did the bit break the skin: YES NO

How does your dog react if:
Touched while eating: _____
Bowl is touched: _____
Touched while playing with toy: _____
Forced off furniture: _____
Touched while sleeping: _____

How does your dog get exercise: _____
Does your dog play games: YES NO If yes, what type: _____
Does your dog have a preferred toy: YES NO If yes, what: _____
Does your dog like water: YES NO UNKNOWN If yes, do they swim: YES NO
Where is your dog during the day: Crate Gated room Roaming house Outside
How long is your dog left alone: Never 1-3 Hours 4-8 Hours 9-12 Hours 12+ Hours
Where does your dog sleep at night: Crate Gated room Anywhere Outside
Does your dog hunt: YES NO UNKNOWN

Dietary Habits:

What does your dog eat:
Brand: _____ DRY/ WET/ COMBO
How often do you feed: Once a day/ Twice a day/ Free graze
Does your dog get treats: YES NO If yes, what and how often: _____

Training:

Is your dog housetrained: Yes No Occasional accidents
How does your dog let you know they need to go out: _____
How often does your dog require to go out: _____
Is your dog crate trained: Yes No Unknown
Has your dog received any obedience training: Yes No If yes, where and how much: _____

Does your dog follow basic commands: Sit Down Stay Come Heel Drop it
When outdoors, is your dog: Fenced Allowed to roam Kept on leash Invisible fence On a runner
Is your dog leash trained: Yes No Walked on: Collar Harness
Is your dog use to a fenced yard: Yes No If yes, will your dog climb the fence: Yes No Unknown

How does your dog ride in a car: _____

Does your dog chew on household items: Yes No

Can your dog go up and down stairs: Yes No

Date: _____ Signature: _____

I hereby voluntarily and irrevocably surrender this dog to Tall Tails Beagle Rescue. I represent and warrant that I am the lawful owner of this dog, and I have full power and authority to surrender this dog. No other person has any legal ownership of this dog. I have disclosed all material information regarding the medical and behavioral history of this dog. I willfully surrender any medical records and information pertaining to this dog. Tall Tails Beagle Rescue has my permission to contact my veterinarian for any necessary information pertaining to the dog, and I hereby consent to the release of any and all medical information by any medical provider. I certify that to the best of my knowledge I have disclosed all of the information about the dog concerning health, behavior, history, and anything else that may affect the safe placement of the animal in a new home.