

Heartland Sheltie Rescue Owner Relinquish Form

Owners Name:		Address				
City/State	Phone Date of surrender					
Reason you are giving up this dog	?					
Dogs Name	DOB:	Color:		Sex	Altered	
Date of alter: Dogs	s Age Now:	Dogs weight?				
<u>Does the dog like</u> : Other dogs? Comments:					g in the car?,	
Is the dog used to living in a house	e?					
Is the dog used to going outside in	a : fenced yard?	O	n a leash	Loose	e in yard	
Please describe the dogs temperar	nent:					
Has this dog ever bitten or tried to Has this dog ever bitten or tried to Please give date and details	attack another an	g? imal?				
Habits:						
Housebroken?						
Will signal if needs out?	How?					
Any bad habits?						
Medical History: Last Vet Visit:						
Last vaccination for rabies:		Last heartworm	check:			
Type of heartworm preventative and	l date of last dose give	ven:				
Veterinarian Name						
City/StateNeeds to be On ANY Medication?:						
Needs to be On ANY Medication?:		_Are you deliverin	g medication alo	ong with the d	og?	
Items you are sending with Dog:	Γoys Food	Collar	LeashC	Crate \	et Records	
AKC papers Donation						
homes when their present owners car Please read, sign and date the follow I,	in no longer keep the ving: , hereby transfer c ving this dog to Hea r	em. omplete ownership	o of the Sheltie, cue knowing that	namedat they will pla	ace this dog in an adoptive	
home. I certify that I am the sole, rig given above, is true and complete, a and agree to hold harmless and inde liability of any kind whatsoever aris	and I have not willfu mnify Heartland Sh	lly concealed any neltie Rescue and	information abou	ut this dog. I helaims, deman	ds, actions, causes of action,	
SIGNATURE OF OWN	ER:	DATE:				