

Just One More Dachshund Rescue

DOG OWNER RELINQUISHMENT FORM

To provide the best care for your pet, it is necessary to have your pet's behavioral and medical histories available for review.

Name:

Home #

Cell #

Address:

City:

State:

Zip:

Email:

Dog's Name:

Age:

Gender:

Breed/Mix:

Is your dog spayed/neutered? Y or N

Is your dog microchipped?

Reason for relinquishing dog?

Is the dog from a rescue? Y or N

Does the dog belong to you? Y or N If no, what is your relationship to owner?

How does your dog behave:

Around family?

Around strangers?

Around children?

Around other animals?

Indicate ages and number of adults/children in household.

What are some of your dog's favorite games, toys or activities?

Is the dog housebroken? Y or N Yes

Does your dog bark excessively? Y or N If yes, explain:

Has the dog ever bitten anyone: Y or N If yes, please explain circumstances:

Is dog trained to walk on leash? Y or N Is dog crate trained? Y or N

Who is your Dog's current veterinarian? Please provide the vet's name and email plus hospital name.

Has dog been tested for heartworm? Y or N Result:

Is dog currently on heartworm prevention? Y or N, What brand? Last date given:

Is dog currently on flea/tick prevention? Y or N, What brand? Last date given:

Does your dog have any current or past health issues? If so, please explain:

Is your dog current on vaccines? Y or N

If yes, please provide copies of rabies certificate and other vaccines.

Is your dog currently on any medications? Y or N Please List:

What brand of food do you feed the dog?

How much and how often?

I hereby certify that I am the rightful owner/keeper/caretaker/custodian of the animal(s) who is/are the subject of this Dog Relinquishment Form, hereinafter referred to as "the animal." I hereby surrender any and all property rights to the animal. I certify that no other person has a right of property to the animal. I understand that by surrendering my property rights to the animal, the animal may be transferred into the custody of an animal shelter. I also hereby certify that the animal has/has not [circle one] bitten or scratched a human or another animal within the past 10 days. I understand that once I relinquish the animal, the animal will not be available to be returned. I further certify that I have read and understand the terms of this Dog Relinquishment Form.

Date _____ Signature_____

Name of JOMDR representative reviewing questionnaire: _____