LASER
Large Animal Shelters & Emergency Readiness

Animal Intake and Pickup Form
(Equines/Alpacas/Llamas)

Animal ID #: _____ **Stall #:** _____ **Animal Name:** _____ **Age:** _____

SECTION I: COMPLETED BY LASER VOLUNTEER WITH PERSON LEAVING ANIMAL (Please Print)

Owner Name: _____ Email: _____

Owner Address: _____

Owner Primary Phone: _____ Alternate Phone: _____

If not Owner, Name of Person Bringing Animal: _____

If not Owner, Phone Number of Person Bringing Animal: _____

Owner's Veterinarian: _____ Veterinarian Phone Number: _____

List Special Needs (including feed requirements/restrictions)/Health Concerns/Behavior Concerns for Animal:

_____

_____

Other than Owner, names and phone numbers of people authorized to pick up animal:

1. _____

2. _____

Animal Medical Care Authorization: This document authorizes LASER to arrange for Veterinary care for animals placed in its care by Owners or responsible parties during times of evacuations. The owner agrees to assume any costs associated with providing such medical care and agrees to reimburse, in a timely manner, the Veterinarian or medical provider for costs incurred for such services.

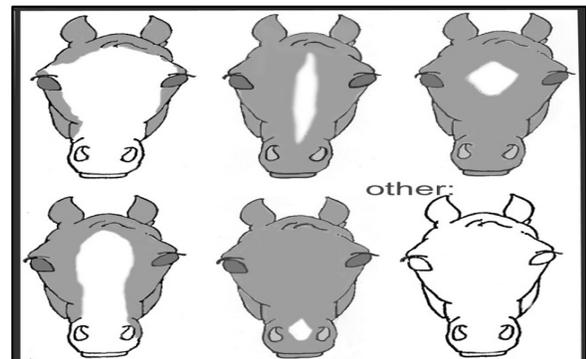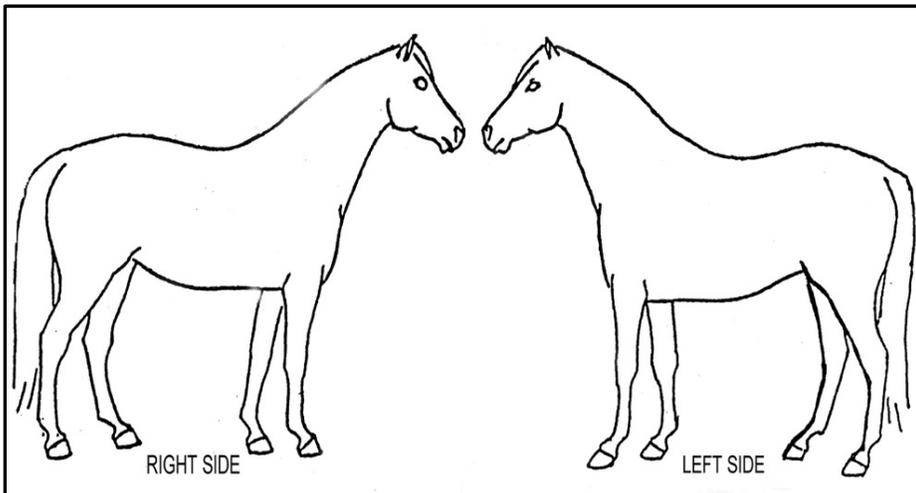Name of Owner or Responsible Party _____ Date: _____

Signature of Owner or Responsible Party _____

SECTION II: COMPLETED BY LASER VOLUNTEER AFTER ANIMAL UNLOADED

Mark animal with ID marker with assigned number

Noticeable Scars/Injuries (be specific): _____

☐ Horse
☐ Pony
☐ Mule
☐ Donkey
☐ Llama/Alpaca
☐ Other _____

☐ Mare
☐ Gelding
☐ Stallion

Coat Color:
☐ Black   ☐ Bay   ☐ Buckskin/Dun   ☐ Roan
☐ Gray/White   ☐ Appaloosa   ☐ Chestnut/Sorrel ☐ Paint/Pinto
☐ Palomino   ☐ Other _____

Mane and Tail: ☐ Dark ☐ Light ☐ Same as coat

RIGHT SIDE   LEFT SIDE

other:

☐ Body and Legs all one color; no markings

☐ No markings on face

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RETURNED TO OWNER/AUTHORIZED REPRESENTATIVE

Owner/Representative (print name) _____

Vehicle License Plate # _____ Driver's License # _____

Trailer License Plate # _____ Phone Number _____

Owner/Representative's Statement: I have inspected this animal and find that it is in satisfactory condition with no injuries that were not present upon arrival.

Signature _____ Date_____

Animal Released by (Volunteer Name) _____ Time _____ am/pm (circle one)