## **DOGzHAUS** Owner Surrender Form

If you have not found any solution after carefully considering, then you are welcome to fill out our surrender form below. We are always at capacity at DOGzHAUS foster care so we may not be able to take your dog but we review all applications. We receive many each day and only reply to those we can take, but it may take up to a week to hear from us. Thank you. We realize this is a difficult decision to you and your family. We wish you all the best.

Date:			
Your Name:	6		
Your Address:			_
Your phone number : <u>(home)</u>	Red	(cell)	_
Your email address:			
Referred by:	SAL	- de la	
		3	
DOG's Name:	No.		
DOG's Microchip # (if any):	2 3		
DOG's Breed: Age:	Color:		DOG's
DOG's sex: M( ) F( ) Neutered/spayed	?: Yes( )No	( ) Current Weight:	- 1 A K
Do you know where the dog was adopter/p	ourchased fron	n?	-

THE MORE WE KNOW ABOUT YOUR DOG, THE BETTER JOB WE CAN DO OF FINDING THE BEST POSSIBLE HOME FOR IT. PLEASE ANSWER THE FOLLOWING QUESTIONS AS COPLETELY AND HONESTLY AS POSSIBLE.

#### Does your dog like:

Water(), Cats (), Other Dogs(), Children(), Baths(), Car Rides(), Being Brushed(), Strangers(), Nails Trimmer (), Being on a leash()

#### Is your dog:

Housebroken ( ), Crate Trained( ), Obedience Trained( ),

Food Aggressive -eg: dog growls if you get near food/bones/toys ( ),

#### Does your dog:

Chew ( ), Bark( ), Jump on people( ), Dig( ), Come when called( ),

### Has your dog ever

snarled or snapped ? Please be honest : Yes( ) No( )

been abused? Yes( ) No( )

bitten a person or other dog? Yes( ) No ( )

Can you leave him/her unattended in the house for long periods of time without him/her damaging anything?

Yes ( ) No( ) Don't know( )

D <mark>oes your dog have</mark> a local veterinar	ian? Yes ( ) No( )	
Veterinarian Information:		No the Constant
Vet's Name:	Clinic Name:	
Vet Address:	and the second second	NR3 21 24 12
Vet Phone:		
Vet website:		
Vaccination Date:		
DHLPP :	Rabies:	Bordetella:

# DOGZHAUS

Last Vet Visit Date: \_\_\_\_\_

DOG's feeding instruction:		DOGZHAUS
Dog Food brand:	How many meals per day?:	
Amount at each feeding:		

I am surrendering my dog to DOGzHAUS rescue and wish the rescue to place my dog and by my signature certify I am the legal owner or the legal responsibility of the above dog and the above information is truthful, correct and complete. I understand any attempts to mislead or falsify information will result in my dog either being denied acceptance into DOGzHAUS rescue. Surrendering fee minimum \$200 payable to DOGzHAUS will cover the dog's **basic** vet care, supplies and food.

DOG's NAME:				
YOUR NAME:	201			
YOUR SIGNATURE:	1.20	market and		
DATE:				
				and the second
DOGzHAUS use only:				
Evaluator's Name:	1. S. C. C.	1000		
Signature:		X. 80	N. A.	A COLORED
Phone Number:			S. S. Start	

