



Dog Surrender Form

Dog's Name: _____

To be considered for a surrender, you must:

- Have the knowledge and consent of all members of the household
- Be 18 years of age
- Have valid I.D and a current address
- Understand that the Northumberland Humane Society has the right to refuse your application.

Owner Information:

Name: _____

Address: _____ Apt#: _____

City: _____ Postal Code: _____

Phone #(s): _____

Email Address: _____

General Information

Gender: _____ Spayed/ Neutered: _____ Age: _____ Breed: _____

Colour: _____ What kind of ID does the dog have? Tattoo: _____ Microchip: _____

History

Why are you surrendering this dog?

If we could help you resolve this issue would you be interested in keeping the dog? _____

How long have you owned this dog? _____ Where did you acquire this dog? _____

Has your dog ever bitten anyone before? _____ If yes, under what circumstances and when?

If yes, is the incident documented with By-law, Animal Control or Public Health? _____

Medical

What veterinary clinic does the dog visit?

Has this dog seen a veterinarian at least once per year? Y N Unknown

Is this dog currently up to date with vaccines? Y N Unknown

Date of last vaccination: _____

Has this dog ever required medical surgery? Y N Unknown

If yes, please explain:

Has this dog ever been diagnosed and/or treated for any medical problems?

Y N Unknown

If yes, please explain:

Is your dog currently receiving any medication? _____

Have you noticed any coughing with your dog in the past week? Y N

In the last 7 days, where has your dog been in close contact with other dogs, eg. rescue, boarding, groomer, daycare, dog park, pet supply store, vet clinic? _____

Dietary Habits

Is your dog on a prescription diet? Y N

What brand of food are you currently feeding your dog?

Which does your dog eat? **(Please circle)**

Dry Only Can only Combination of both People food

How often is your dog fed? **(Please circle)**

Once a day Twice a day Free fed

Training

Is your dog housetrained? _____ If not, how often does the dog have accidents? _____

Has your dog received obedience training? _____ If yes, from who and what methods were used?

What are the basic commands your dog knows?

Sit _____ Stay _____ Down _____ Come _____ Heel _____ Drop It _____ Other _____

What walking equipment works best with your dog (e.g. flat collar, head halter, front-clip control harness, pressure collar, limited slip collar, prong collar, choke chain, electric collar)?

How is your dog's behaviour off leash?

Is your dog used to being in a fenced yard? Y N Unknown

Will your dog chew household items when left alone? Y N Unknown

Does this dog bark: Rarely/Seldom _____ Alarm only _____ Frequently _____ At anything _____

Please elaborate:

Has this dog been crate trained? Y N Unknown

Personality

How would you describe your dog's personality most of the time?

Very Active _____ Playful _____ Affectionate _____ Friendly to Visitors _____
Couch Potato _____ Lap Dog _____ Distant _____ Shy to Visitors _____
Talkative _____ Quiet _____ Fearful _____ Independent _____
Aggressive _____ OTHER _____

Play Style

How does your dog like to play?

Lifestyle & Home Life

If this dog has lived with other cats, how did they interact?

Does this dog get along with other dogs?

If this dog has lived with dogs, how did they interact?

Has the dog regularly been around children? Y N Unknown

If yes, indicate what ages:

How did the dog and the child interact?

Have experiences with the dog and child(ren) always been positive? Y N

If no, please explain

Is the dog most comfortable with: Women _____ Men _____ Kids _____ Teenagers _____
Seniors _____ Loves all people _____

Please tell us some things your dog dislikes:

Please tell us some things you truly love about this dog!

Are there any quirks or habits you are not fond of in your dog? (This question helps provide shelter staff with valuable insight into your pet and can help us ensure your pet has a successful adoption. Many quirks or habits are common behaviours natural to all dogs and/or have simple solutions to resolve which we can share with a future adoptive family.)

Release of Medical Information and Veterinary Records

I, _____, hereby request that _____ release
(owner/custodian) *(veterinarian)*

any information pertaining to _____ contained in the veterinary records
(name of animal/s)

at the _____ to the Northumberland Humane Society.
(clinic name)

This request and authorization is limited to the above-noted agency. This shall be your good and sufficient authority for doing so.

Dated at _____ this _____ day of _____, 20_____.

Name of owner/custodian

Signature

Name of Witness

Signature