



Doggidy Doo
Surrender Form
OWNERS INFO :

DATE: _____

Name: _____

Address: _____

Phone: _____ Date of Birth: _____

DOGS INFO:

Name: _____ Chipped? _____ If, yes, Chip ID _____

DOB: _____ SEX: _____ Spayed: _____ Neutered: _____

BREED: _____ Color: _____

Why are you surrendering this dog? _____

Where did you get this dog from? _____

How long have you had this dog? _____

To your knowledge, has this dog bitten in the last 10 days? _____

If so, was the bite incident reported to Animal Control Authorities? _____

Is this dog current on its vaccinations? _____

Name & number of vet _____

What kind of food do you feed it? _____

Does it have any behavioral problems? _____

Any known health problems? _____

Is there anything in particular you would like to share with us about this dog? _____

I, _____, hereby certify that I am the true and lawful owner of the above identified dog and that I freely and voluntarily surrender and relinquish all possession and ownership of this dog to Doggidy Doo. I further agree to hold Doggidy Doo harmless from any and all liability arising from false or misleading statements or information provided by me.

Dated: _____

Name

Signature