

Dog Surrender

Deciding to part with a family pet is an extremely difficult decision. Your decision to look to us as a sanctuary for your pet shows your concern for the long term well being of this animal. Although we do not have the capacity or the ability to take in every family pet brought to us, by filling out this application you are giving your pet the best chance of a future family. Please be honest with your answers, what may be a problem for you, may not be for another family. We will use this information to help match your pet with a new family and help make the transition into a new home as smooth as possible for your pet.

Date: _____ Dog's Name: _____ Birth Date: _____

Male / Female Age: _____ Breed: _____ Color(s): _____

Size or weight of dog: _____

Microchipped? Y N # _____ Spayed/Neutered? Y N if yes, when _____

Is your dog a stray? Y N If so, how long have you had it? _____

Was your dog adopted from the FFF Inc.? Y N If yes, when _____

If No, where did you get your dog? _____ How long have you owned your dog? _____

How many homes previous homes has your dog had? _____

Reason(s) you are surrendering your dog: _____

Approximate date of last vaccines and veterinary exam: _____ Can medical records be provided? Y N

Name of veterinarian: _____ Phone number: _____

Has your dog had any surgeries besides spay/neuter? Y N If yes, please explain: _____

Does your dog have any past or present injuries? Y N If yes, please explain: _____

Does your dog have any health problems? Y N If yes, please explain: _____

What brand of food is your dog used to? _____ Dry Canned Both

Certain times to feed? ___AM ___PM ___free feed Does your dog get table scraps? Y N

Does your dog get treats? Y N If yes, what kind? _____

Has your dog shown any signs of behavioral challenges? Y N If yes, please describe _____

Has your dog lived with or been around other dogs? Y N

If yes, what size? (mark all that apply) Sm Med Lg What gender? Male Female Both

What was your dog's reaction towards them? Playful Doesn't mind Dominant Aggressive Submissive other: _____

Has your dog lived with or been around cats? Y N

What is your dog's reaction towards them? Playful Doesn't mind Aggressive Chases them Afraid of them other: _____

Are there any other types of animals that your dog has been around? Y N If yes, what type? _____

Describe your home: Very active Average Activity Quiet

Do you consider your dog: High energy Medium energy Couch potato

Has your dog ever harmed/injured/bitten another dog? Y N If yes, describe _____

Has your dog ever harmed/injured/bitten a cat? Y N If yes, describe _____

Has your dog ever harmed/injured/bitten any livestock or wildlife? Y N If yes, please explain _____

Has your dog been around children? Y N If so, what age of children? 0-5 6-9 10 and older

What was your dog's reaction towards them? _____

Has your dog ever been aggressive toward - snapped, growled at or bitten a child? Y N

If yes, how many times and what were the circumstances? _____

Has your dog ever been aggressive toward - snapped, growled at, or bitten an adult? Y N

If yes, how many times and what were the circumstances? _____

Is your dog housebroken? Y N Partial If partial, please explain _____

Is this dog protective of belongings? (food, bed, toys, etc.) Y N Your home? Y N Your family? Y N

If yes, describe how and what it protects: _____

How is your dog with strangers? Everybody's friend Runs and hides Shy Barks at first then okay Good once he/she knows them Will bite Doesn't care

Has your dog lived primarily indoors or outdoors? _____ If outdoors, describe: _____

How many hours a day is your dog used to being alone? _____ Is your dog crate trained? Y N

Is your dog used to a fence? Y N Type: _____ Height: _____

Has your dog ever jumped a fence? Y N Has your dog ever climbed or dug under a fence? Y N If yes, please explain _____

Would your dog run away if unleashed? Y N

What is your dog afraid of? Thunder Rain Vacuum Fireworks Baths Toddlers Men Women Strangers Cats Other _____

How does your dog do on car rides? _____ Does it get car sick? Y N

How does your dog do at the vet? _____ Is it aggressive toward the caregiver? Y N

How does your dog do with getting it's nails trimmed? _____

Is there anything that seems to make your dog nervous or anxious? _____

Does your dog have separation anxiety? Y N If yes, is it on medication? Y N _____

Does your dog chew inappropriately or excessively on things other than its toys? Y N If yes, please explain _____

What would best describe your dog? (mark all that apply) Easy going Constant companion Obedient

Destructive Friendly Lap dog Quiet Talkative Other: _____

What are some things your dog enjoys? _____

Does your dog know any commands or training? _____

Is there anything your dog does not tolerate?

What other information can you provide about your dog that will help us find the best possible new home for it?

What would be the best home/situation/environment for your dog?

Our Organization averages an expense of \$200 per animal just to get them ready for adoption and we are funded strictly on donations. Are you willing to make a non-refundable donation towards our adoption program if your pet is accepted into our organization.

Yes- I would be willing to make a non-refundable donation of:

\$25 \$50 \$100 Other

Note: donations or the amount does not determine the order a pet is accepted nor does it influence the opportunity for your pet to be accepted.

I hereby affirm that the above information is true, accurate and complete to the best of my knowledge.

Signature:

Please print Owners Name:

Mailing Address:

City, State, Zip:

Phone #: Alternate phone #:

You can e-mail this form to fffinc@triad.rr.com or mail to P.O. Box 850, Yadkinville, NC 27055.

Office Use Only:

Received:

Contacted - phone:

email:

Deny / Approve

Comments: