



RELINQUISHMENT FORM

Your name:	
Address:	
Home phone:	Cell Phone:
Dog's name:	Breed:
Sex: M/F	Age:
Spayed/neutered: Yes/No	Certificate: Yes/No
Colouring:	
Brand and type of food the dog is currently eating:	
Food feeding schedule:	
Known allergies, medications or medical conditions (please describe):	
Reason for wanting to relinquish the dog:	
What date does the dog need to be relinquished by?	

Vet history (include copies of receipts/certificates/tags):

<i>Vaccination</i>	<i>Date of last treatment</i>	<i>Veterinarian Office</i>	<i>Brand</i>
Parvo/Distemper (DA2PPV)	_____	_____	_____
Rabies (certificate or tag)	_____	_____	_____
Bordetella	_____	_____	_____
Heartworm test	_____	_____	_____
Heartworm prevention	_____	_____	_____
Flea/tick	_____	_____	_____

Name of current Veterinarian:	Phone number of Veterinary office:
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Is the dog paper/pee-pad trained? Yes/No	Crate trained? Yes/No
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Used to being in a crate? Yes/No	Knows basic obedience commands? Yes/No
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Has had obedience training? Yes/No	Good with other dogs? Yes/No
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Good with cats? Yes/No	Good with children? Yes/No
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Have temperament issues?
Yes/No.

Bitten anyone?
Yes/No.

Jump fences or dig under fences?
Yes/No

If you have answered yes to any of the above questions, please explain:

Relinquish Agreement:

(I/we) fully understand that by executing this document and delivering the above described dog to Before the Bridge Senior K9 Rescue Inc. that (I/we) hereby relinquish any and all legal rights of ownership of the above-described dog.

(I/we) represent that (I/we) are the lawful owner(s) of, and have good title to and the right and power to gift, sell, assign, transfer, convey and deliver this said dog; and that said dog is free and clear from claims of ownership or other encumbrances of any kind or nature whatsoever by any other person or entity.

(I/we) understand that Before the Bridge Senior K9 Rescue Inc. will act in the best interest of said animal in its care and placement. By assuming ownership, Before the Bridge Senior K9 Rescue Inc. reserves all rights in regards to making all decisions in regards to the dogs care, placement and medical treatment.

(I/we) understand that Before the Bridge Senior K9 Rescue Inc. has the right to return the dog to the owner if said dog shows aggression in the foster home

Date: _____

After relinquish is approved – to be filled out by Before the Bridge Senior K9 Rescue Inc. and relinquish owner at the date and time of relinquish pick up/drop off –

IN WHITNESS WHEREOF, I have hereunto set my hands this

_____ day of _____, 20 ____.

Name of relinquish owner: _____

Signature of relinquish owner: _____

Name of relinquish co-owner: _____

Signature of relinquish co-owner: _____

SIGNED, AND DELLIVERED IN THE PRESENCE OF:

Name of Before the Bridge Senior K9 Rescue Inc. representative: _____

Signature of Before the Bridge Senior K9 Rescue Inc. representative: _____