



## Dog Surrendering Form

Box 2126

Hanna, AB T0J 1P0

Ph. 854-0706 Email: info@hannaspca.com

hannaspca.com

Owner's Name: \_\_\_\_\_

Co-owner's Name: \_\_\_\_\_

Do you both currently reside with this dog?  Yes  No

### Owner Information

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### If Co-Owner resides at a different address

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Dog Profile

Dog's Name: \_\_\_\_\_

Breed(s): \_\_\_\_\_

Age: \_\_\_\_\_ Weight: \_\_\_\_\_

Sex/Altered?  Male  Neutered  Female  Spayed If not altered, will you pay to have this dog altered before surrendering him/her?  Yes  No

Housebroken?  Absolutely, 100%, never has had an accident in the house  
 Most of the time, but has had an accident about once a week  
 Not really  
 Not at all. The dog has no clue.

*We are use to housebreaking, so please be truthful.*

Is this dog up to date on all his/her shots?  Yes  No

Does this dog have any known health issues?  Yes  No

If Yes, please describe, including medications/treatments, frequency of vet visits: \_\_\_\_\_

\_\_\_\_\_

Why do you need to give up this dog? \_\_\_\_\_

\_\_\_\_\_

Does this dog like food such as meat, vegetables or eggs?  Yes  No

If so, what and how often? \_\_\_\_\_

Does this dog enjoy the company of (check all that apply):

Men?       Women?       Children?

Other Dogs?     Cats?       Other animals? What kinds? \_\_\_\_\_

Does this dog have a history of (check all that apply):

Digging     Chewing, on what? \_\_\_\_\_

Frequent Barking (describe circumstances): \_\_\_\_\_

Does he/she jump on people?  Yes  No

Does the dog enjoy meeting new people?  Yes  No If No, how does he/she respond? Aloof

Reserved  Fearful

Does he/she  growl and backup,       bark and move forward,  sit or stand and wait to be approached, tail wagging?

Please describe a typical meeting? \_\_\_\_\_

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Has this dog been to a group training class?  Yes  No

If so, who handled the dog in class? \_\_\_\_\_

Have you had any in-home private training lessons?  Yes  No

If this dog has had professional training, can we please have the Name and Phone Number of the trainer? Trainer's Name \_\_\_\_\_ Phone Number: \_\_\_\_\_

Is this dog affectionate with his/her family?  Yes  No

How does he/she react when you touch their feet? \_\_\_\_\_

What happens when you touch his/her tail? \_\_\_\_\_

Does he/she cooperate when having their teeth examined?  Yes  No

Ears examined?  Yes  No

Is he/she comfortable when someone is touching or holding their collar?  Yes  No

Will he/she guard (protect, keep you away from) certain items or locations?  Yes  No

If Yes, please describe. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is the dog cooperative during grooming?  Yes  No

What are the dog's good points? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To your knowledge, has this dog ever been abused?  Yes  No

If Yes, by a  Man  Woman  Child

If Yes, please describe the abuse. \_\_\_\_\_

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Is this dog's life in imminent danger because of a current abuse situation?  Yes  No

If yes, please describe. \_\_\_\_\_  
\_\_\_\_\_

How often does the dog come to you for attention? \_\_\_\_\_

What kind of playtime or exercise is this dog currently given? What kind of playtime or exercise does this dog enjoy the most? \_\_\_\_\_  
\_\_\_\_\_

How soon are looking to place your dog? \_\_\_\_\_

Would you be able to foster the dog until a permanent home is found?  Yes  No

If Yes, how long would you consider 'fostering' your pet? \_\_\_\_\_

*Please understand that we have few foster homes so foster care is not always readily available.*

I certify that I am the owner of this dog, free and clear of all other interests. I certify that this dog is not possessed of any dangerous or vicious propensities and has never bitten or attempted to bite any person or animal, and that I have not wilfully concealed information about the dog that might indicate such propensities. I certify that I have answered the questionnaire above truthfully and to the best of my knowledge regarding this dog.

*The following box is optional. We will not share your information with anyone outside our rescue unless you check the box below.*

If the Hanna S.P.C.A cannot take this dog into its Foster Program, I give the Hanna S.P.C.A my full permission to share all of the information on this questionnaire with other rescues who might be able to help me in placing my dog.

By surrendering my dog to the Hanna S.P.C.A I give up all rights to this dog and I revoke any rights to this dog in the future. By signing this document I understand that this is final and I will have no future claim on this dog.

Owner's Signature \_\_\_\_\_ Printed \_\_\_\_\_

Date: \_\_\_\_\_

Witness Signature \_\_\_\_\_ Printed \_\_\_\_\_

Date: \_\_\_\_\_

Co-Owner's Signature \_\_\_\_\_ Printed \_\_\_\_\_

Date: \_\_\_\_\_

Witness Signature \_\_\_\_\_ Printed \_\_\_\_\_

Date: \_\_\_\_\_

*The information on this application is strictly confidential and will not be shared with anyone outside the Hanna S.P.C.A Pet Rescue and Shelter unless permission is granted by the applicant.*

Please drop off completed form at the Hanna Learning Centre or mail to:  
Hanna S.P.C.A. Pet Rescue and Shelter  
Box 2126  
Hanna, AB T0J 1P0