

Surrender Contract



Name(s) Relinquisher(s): _____ Name of Dog _____

Street Address: _____

City/State/ZIP: _____

Telephone: Home: _____ Work: _____

Fax: _____ Email: _____

IMPORTANT NOTICE: All owners of the above-named dog must sign this contract before Homeward Bound Golden Retriever Rescue & Sanctuary, Inc. (hereinafter called Homeward Bound) will agree to take this dog.

In regard to the surrender of the above-described dog, I/We, the undersigned, agree to the following conditions:

1. By signing this contract, I certify that I am the owner of this dog.
2. By signing this contract, I understand that this dog becomes the responsibility of Homeward Bound and that I have no further rights to this dog.
3. All decisions regarding the placement of this dog will be made solely by Homeward Bound.
4. The Relinquisher has no rights to information regarding the adoption of this dog.
5. The Relinquisher guarantees to Homeward Bound that this dog's history with regard to biting is accurately described as follows: To my knowledge, this dog:
Has Has Not bitten anyone. Has Has Not bitten another animal.
If "Has" is noted, please describe the circumstances: _____
6. If this dog is not current on vaccinations or has not been spayed/neutered, we would welcome any contributions toward the cost of providing this veterinary care.

Surrender donation: \$ _____
(Cash, Check, or Credit Card)

I/We understand this contract and the policies described above, and agree to their conditions. I/We agree to hold Homeward Bound, its officers, board members, agents, and volunteers harmless for any loss of, damage to, or injury to persons, animals, or property arising from or relating to the placement of this dog.

Signature of Owner/Relinquisher: _____ Date: _____

Signature of Homeward Bound Agent: _____
Assigned HB Dog No. _____

Surrender Contract



This information can be completed by form, or online at:

www.homewardboundgoldens.org/surrender/intake-checklist.html

Name of Dog: _____ Dog No.: _____

Age: _____ Color: _____ Weight: _____ Sex: Male Female Altered? Yes No

Rabies Date: _____ DHLPP Date: _____ Bordatella Date: _____

Heartworm Preventive Date: _____ Flea Preventive Date: _____

Please explain the following:

Current health problems: _____

Medications the dog is currently taking: _____

Is your dog good with children? _____

Is your dog good with cats? _____

Is your dog good with other dogs? _____

Does your dog like to swim? _____

Does your dog like to ride in cars? _____

Does your dog walk well on leash? _____

Where does your dog sleep at night? _____

Where does your dog stay during the day? _____

Does your dog jump fences? _____

Does your dog come when called? _____

Is your dog house-broken? _____

Is your dog crate-trained? _____

Is your dog afraid of storms? _____

Does your dog have separation anxiety when left alone? _____

Does your dog growl at strangers? _____

Will your dog let you take food or toys away? _____

Does your dog know any of the following commands: Sit Stay Fetch

How does your dog behave while being groomed? _____ Bathed? _____ Brushed? _____

What do you enjoy the most about this dog? _____

What do you enjoy the least about this dog? _____

What would be the ideal home for this dog? _____