

APPLICATION TO SURRENDER A GOLDEN TO GRRAND

This Surrender Application is NOT a contract for legal release, nor is it assurance that GRRAND will accept your dog into its rescue program.



August 2018

APPLICANT INFORMATION

Full Name:		
Home Phone:	Cell:	Other:
Street address:		
City:	State:	ZIP Code:
Email Address:		

BASIC INFORMATION ABOUT YOUR DOG

Dog's Name:	Dog's Age:
Gender:	Spayed/Neutered?
How long have you had the dog?	How many owners has the dog had?
Where did you acquire your dog?	
Do you own the dog?	Do you want to give up ownership of your dog?

Explain why the dog is being given up for adoption. Please provide details.

MEDICAL AND PHYSICAL HISTORY

What medical conditions or physical/mobility disabilities does your dog have? Explain and include all issues including allergies, etc. Use back of form if necessary.

Has your dog ever had seizures? Yes ___ No ___ If so, describe severity and frequency along with any prescribed medications and dosages.

Date of last visit to your vet for shots and vaccinations:	
Are all vaccinations up to date? Yes ___ No ___	Do you have proof of vaccinations? Yes ___ No ___
Is your dog on heartworm prevention? Yes ___ No ___	Date of last blood test for heartworm: _____ Day of month heartworm prevention given: _____
Is your dog on flea protection? Yes ___ No ___	Day of month flea protection given: _____
List past surgeries:	Has your dog had puppies? Yes ___ No ___ If so when?

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List any medications your dog is taking and include frequency and dosage.

Please specify the brand and flavor of the food your dog eats.

If your dog is on a special diet, please specify the condition and the type of food.

Name of veterinarian:

Vet's Phone:

City in which your vet is located:

State in which your vet is located:

LIVING CONDITIONS

What is your dog's feeding schedule? List amount of food and frequency.

Where does your dog spend most of the day? Indoors ___ Outdoors ___

Where does your dog sleep at night?

How long is the dog left alone during the day?

Does your dog get regular exercise? Yes ___ No ___

What type of exercise?

How is your dog confined to the property (fence, chain, etc.)?

How often, if at all has your dog escaped confinement? Please explain.

CHILDREN AND OTHER PETS

Are there children in your household? Yes ___ No ___

If so, what are their ages?

Have there been any problems between the dog and children? Yes ___ No ___
If yes, please explain in detail.

Are there other pets (including cats) in your household? Yes ___ No ___
If so, what kind. Please list breed, size, and age of each.

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List the dog's behavior with all other pets in the household. Please provide all details.

Does the dog get along with other dogs in public areas? Yes ___ No ___ If not, please explain in detail.

BEHAVIOR / TRAINING

Describe the energy level of the dog.

Please respond to these traits:	Yes	No	Please respond to these traits:	Yes	No	Footnote
House broken?			Food or toy aggressive?			*
Crate trained?			Bite history?			*
Able to obey minimal commands?			Storm phobic?			*
Trusted to roam free in the home?			Jumps, digs or scales fences?			*
Leash trained?			Chewing problems?			*
Invisible fence trained?			Fear/aggression around strangers?			*
			Fear/aggression around other animals?			*
			Excessive barking?			*
*If yes, please explain in detail below.						

If you responded "Yes" to any of the traits in the second column above please explain in detail including severity, frequency, etc.

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Please list any other information that may be helpful for us to know about the dog in order to match it with the best possible home. Also, include anything you may know about a previous owner (if applicable). Attach separate sheet if necessary.

SIGNATURE OF APPLICANT

I/we hereby affirm, acknowledge, warrant and represent that ALL information contained in this application for surrender is true and correct to my/our best knowledge and belief.

Signature:

Date: