

# Paws Hoofs and Claws Inc.

## Animal Surrender Form



Registered Owner Details												
Owner Name												
Address (Where the animal is registered)												
Telephone (Work)	W											
Telephone (Home / Mobile)	H					M						
Email Address												
Date of Birth (Must be over 18 years of age)												
Animal Details												
Animals Name					Previous Name							
Species (Dog, Cat, Specify if Other)												
Breed												
Date of Birth (If known)					Age			Sex				
Microchip Number												
Date Microchip Implanted					Implanter Name							
Council Registration Number					Expiry Date							
Is the animal Desexed	<input type="checkbox"/>	Y	<input type="checkbox"/>	N	Date of Procedure							
Is the animal Vaccinated	<input type="checkbox"/>	Y	<input type="checkbox"/>	N	Date of Last Vaccination							
Vaccination Details / History	<input type="checkbox"/>	C3	<input type="checkbox"/>	C4	<input type="checkbox"/>	C5	<input type="checkbox"/>	F3	<input type="checkbox"/>	F4	<input type="checkbox"/>	F5
When was the animal last Wormed?	<input type="checkbox"/>	Never			Date last Wormed							
Name of animals regular Veterinary Clinic												

## Declaration

1. I agree that I am the legal and registered owner of the above-mentioned animal. I agree to release the animal to Paws Hoofs and Claws Inc. as I am unable to provide suitable care;
2. I relinquish any claims that I may have on this animal and agree that Paws Hoofs and Claws Inc. may take any necessary steps in order to rehome this animal;
3. I agree that any outstanding costs that I may have incurred as a result of the ownership of this animal have been finalised prior to releasing him / her to Paws Hoofs and Claws Inc. and I have no claim on Paws Hoofs and Claws Inc. in relation to those costs;
4. I confirm that this animal has not been declared dangerous and there are no outstanding fines, complaints or local council orders with regard to this animal;
5. I have signed change of ownership papers for microchip and registration details.

<b>Owners Name</b>	<b>PHC Representative Name</b>
<b>Owners Signature</b>	<b>PHC Representative Signature</b>
<b>Date</b>	<b>Date</b>

## Office Use Only

PHC Animal ID Number		Photo ID Sighted	Y	N	Microchip Details Updated	Y	N	Change of Ownership Completed	Y	N
<b>Surrender Fee Amount</b>	\$	<b>Comments / Notes</b>								