

Boston Terrier Rescue of East Tennessee Owner/Stray Release Form



Dog's Name: _____ Breed: _____ Gender: _____

Color: _____ Spayed/Neutered: Yes No Unsure Weight: _____

Age: _____ Age when Acquired: _____ Microchipped: Yes No Unsure

If yes, microchip company: _____ Microchip number: _____

How dog was acquired: _____ Was this dog originally a stray?: Yes No

If the dog was a stray, please answer the questions within the box. If not, continue below.

Please describe the actions taken to find the stray dog's family. We need to have note that a reasonable effort has been made to locate the family in order to follow dog law protocol. Fill out information fully and to the best of your ability.

Date found: _____ Did dog have tags? Yes No If yes, describe: _____

How many days/months did you look for the dog's family? _____

Where was this dog found? Be specific:

Actions taken to locate owner (circle all that apply): Called shelters/rescues Called vet offices
Posted fliers Placed ad online Placed ad in newspaper

If you did any of the above, describe (ex. shelters/vets called, where fliers were posted, where ads were placed):

If the dog had tags, please describe how you used them to attempt to locate the dog's owner

The following questions are REQUIRED for owned dogs. If the dog is a stray, please answer as many questions as you can.

Name, Address & Phone of Vet(s): _____

Dates of Vaccines: Rabies: _____ DA2PPv: _____ Bordetella: _____

Date of Heartworm Test: _____ Result: Negative Positive

Date of Last Heartworm Preventative Treatment: _____

Heartworm Treatment Manufacturer & Brand: _____

Please list the dog's health issues (including skin and ear):

What brand of food does the dog eat? _____ Feeding schedule: 1x/day 2xs/day Free Feed

How much do you feed the dog: _____ What time(s) does dog eat? _____

Food allergies (ex. peanut butter): _____

Continue on next page.

Dog's favorite toy: _____

How long is dog used to being alone during the day?: _____

Where does the dog spend the day?: _____

Where does the dog sleep at night?: _____

Is the dog fearful of anything (ex. thunderstorm, vacuum): _____

This dog... (check all that are true.)

- | | | |
|---|---|---|
| <input type="checkbox"/> enjoys riding in cars. | <input type="checkbox"/> chases cars. | <input type="checkbox"/> enjoys walks. |
| <input type="checkbox"/> enjoys swimming. | <input type="checkbox"/> comes when called. | <input type="checkbox"/> doesn't mind being crated. |
| <input type="checkbox"/> jumps over/climbs fences. | <input type="checkbox"/> growls at strangers. | <input type="checkbox"/> has obedience training. |
| <input type="checkbox"/> digs holes. | <input type="checkbox"/> doesn't mind being bathed. | <input type="checkbox"/> is house (potty) trained. |
| <input type="checkbox"/> allows you to take food/toys away. | | |

Please be especially detailed with the following questions. A dog's bite or growling history, or his/her likes or dislikes with animals or groups of people does not affect our decision, but if we do take the dog in, we need to know of the dog's disposition regarding these matters.

This dog is comfortable with (circle all that apply)... Men Women Children Other Dogs Cats

If uncomfortable with people/animals, please explain his/her reaction: _____

Has the dog ever bitten anyone? Yes No **If yes, please explain the situation(s):** _____

What are the dog's best & worst characteristics: _____

Why are you giving up this dog?: _____

Please use this space to list any other comments: _____

Is this your dog? (circle one): Yes, this is my dog. No, this dog is a stray. No, I'm surrendering this dog on someone else's behalf

If you are surrendering/filling out this form for someone else, why?: _____

Agreement

We certify that we own the above dog and that this dog has not shown any signs of aggression or bitten anyone in the past ten (10) days (unless specified in this form) and that the statements above are true and accurate. We acknowledge and understand that if accepted, the dog becomes the sole property of the Boston Terrier Rescue of East Tennessee. We understand that if we are acting as an agent for someone else in filling out this surrender form, we have full consent of the owner and are responsible for the information on this form.

Relinquisher Signature: _____ **Co-Relinquisher Signature:** _____

Printed Name(s): _____

Full Address including city, state and zip code (no P.O. Boxes):

Phone 1: _____ **Phone 2:** _____

E-mail: _____ **Date:** _____