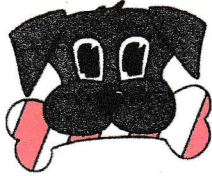

Dog Surrender Form



ODIE'S PAW PALS

Owner details

First Name: _____ Last Name: _____

Address: _____

Suburb: _____ Postcode: _____

Telephone (home): _____ Mobile: _____

Identification type (drivers permit/pension card): _____ ID No: _____

Animal details

Name: _____ Breed: _____

Colour: _____ Age/date of birth: _____

Sex: Male Female Desexed: Yes No Microchip number: _____

PLEASE READ THIS STATEMENT CAREFULLY AS IT SUMMARISES THE LEGAL POSITION WHEN YOU LEAVE YOUR PET.

I the undersigned declare the following:

1. I am 18 years of age or over and I am the legal owner of this animal.
2. The information I have provided today is true and correct.
3. No other person owns or has interest in this animal or, if any person has such interest, they have authorised me to surrender the animal on their behalf.

5. I understand that by completing and signing this form that I have surrendered my animal to **Odie's Paw Pals** and that it no longer belongs to me and that it immediately belongs to **Odie's Paw Pals** I therefore relinquish all claims to the animal herein described.

I certify that I am the true owner or have the owner's authority.

Signature: _____ Date: _____

General details

I am unable to keep my dog due to: _____

Is your dog registered with council? Yes No Unsure *If yes/unsure, which council?* _____

Where did you get your dog? _____

How long have you had your dog? _____

Has your dog ever bitten or acted aggressively towards people or other animals? Yes No

If yes, please detail: _____

Is/has your dog been the subject of a Dangerous or Nuisance Dog Order? Yes No

If yes, please detail: _____

Does your dog have an injury or illness? Yes No

If yes, please detail: _____

Health and wellbeing

Is your dog currently vaccinated? Yes No Unsure Vaccination certificate provided? Yes No

Is your dog currently on any heartworm medication? Yes No Unsure

If yes, what treatment was used, and when is it next due? _____

What is the name of your dog's vet? _____

Does your dog have any allergies? _____

Does your dog have any special dietary requirements? _____

Does your dog have any specific bathing or grooming requirements? _____

How does your dog behave when going to the vet? _____

List any medical conditions, injuries or illness your dog has experienced even if they did not receive veterinary treatment:

Is your dog currently on any medication? _____

Socialisation

How would you best describe your home? Quiet Busy In between

Number of people living at home: Adults _____ Children _____ Age/s of the children _____

If children live in your home, do they have contact with your dog? Yes No Limited contact

If yes, how does your dog behave around the children? _____

How does your dog react when people come to the door/visit your home? _____

How long does it your dog to calm down around visitors? _____

Is your dog happy to interact with strangers/visitors? Yes No

Socialisation (continued)

How many other animals live in your home and what species? _____

How does your dog react to your other animals? _____

Please select all that apply

Around unfamiliar men, my dog is:

Happy Not bothered Nervous Barks Growls Snaps Unsure Other _____

Around unfamiliar children, my dog is:

Happy Not bothered Nervous Barks Growls Snaps Unsure Other _____

Around unfamiliar dogs, my dog is:

Happy Not bothered Nervous Barks Growls Snaps Unsure Other _____

Around unfamiliar cats/other animals, my dog is:

Happy Not bothered Nervous Barks Growls Snaps Unsure Other _____

Life at home

Is your dog an inside or outside animal? Inside Outside Both

How many hours does your dog spend outside each day? _____

Where does your dog prefer to spend most of their time? _____

Is your dog toilet trained? Yes No Most of the time

Does your dog tend to follow you around the house? Yes No

For how many hours is your dog left alone each day? _____

How does your dog behave as you leave the house? _____

How does your dog behave when left home alone? _____

Where does your dog sleep at night? _____

Does your dog wear a jacket during colder weather? Yes No

Temperament and behaviour

How energetic is your dog? Very Moderately Not very Unsure

How affectionate is your dog? Very Moderately Not very Unsure

Does your dog like to chase other animals (e.g. birds or lizards)? Often Occasionally Never Unsure

Does your dog have a favourite area they like to have patted/scratched? Yes No Where? _____

Is there any area of his/her body that your dog doesn't like having touched (e.g. paws, head or tummy)? Yes No

If yes, which areas? _____

Does your dog enjoy being picked up/handled? Yes Sometimes No Unsure

Has your dog ever been in a fight with another dog? Yes No

Temperament and behaviour (continued)

Have you ever needed to put a muzzle on your dog? Yes No

If yes, please detail the circumstances: _____

How does your dog react to travelling in the car? _____

Does your dog bark/whine excessively? Yes No

If yes, please detail when and why: _____

Is there anything your dog is afraid of (e.g. loud noises, men, thunder, the hose or other dogs)? Yes No

If yes, please detail what and your dog's reaction: _____

Has your dog ever escaped from your property? Yes No

If yes, how did your dog escape? And how many times? _____

What type of fencing do you have? _____ How high are your fences? _____

How does your dog react when you turn on the hose?

Plays under water Chases water Bites hose Doesn't care Runs/hides

Recreation

Does your dog have a doggy playmate or best friend? Yes No

If yes, what are their friend's details (e.g. age, sex and breed)? _____

What sort of games does your dog like to play (e.g. fetch, tug of war, swimming)? _____

Does your dog have any favourite toys they like to play with? _____

How often do you walk your dog? _____

Where does your dog usually go on a walk? For how long? _____

Do you ever walk your dog off lead? Yes No

How does your dog behave when they see another dog whilst out walking? _____

Do you let your dog interact/play with other dogs whilst out walking? Yes No

When playing, does your dog display any behaviour that you are not fond of? Yes No

If yes, please give details: _____

Diet and feeding

What types of food is your dog used to eating? _____

Does your dog get protective of their food/bones if people are around? Yes No

If yes, please describe your dog's behaviour: _____

Does your dog ever get protective of their food if other animals are around? Yes No

If yes, please describe your dog's behaviour: _____

Diet and feeding (continued)

If no, please describe your dog's reaction? _____

What is your dog's favourite food/treat? _____

Grooming and bathing

How does your dog react to having a bath? _____

Can you trim your dog's nails easily? Yes No Unsure

If no, how does your dog react to having their nails trimmed? _____

What type of bath does your dog have (e.g. bath, shower or under the hose)? _____

How often do you groom/brush your dog? _____

How does your dog respond to being groomed? _____

Training

Has your dog received any formal training? Yes No

If yes, what style of training did they receive? (Treat training, clicker, check chain) _____

What cues/tricks does your dog know? Sit Stay Come Other _____

How does your dog behave on the lead? Walks well Pulls Slightly Uncontrollable Scared/won't walk

Do you ever walk your dog off lead? Yes No

If yes, when walking off lead, does your dog come when called? Yes No

Have you ever exercise your dog at a public dog park? Yes No Sometimes

If yes, how does your dog behave at the dog park? _____

What sort of walking equipment do you use (e.g. choker, halti, harness)? _____

Further information

Please list any words that best describe your dog (e.g. playful, needy, energetic, loner or sooky): _____

Does your dog display any problem behaviours (e.g. digging, inappropriate urination, escaping or chewing)? Yes No

If yes, what is the behaviour and under what circumstances? _____

What have you done to address this behaviour? _____

Please list any further information about your dog you would like us to know: _____