

**For Spoiled Pets Rescue  
Surrender Form  
452 Carl Broggi Hwy  
Lebanon, ME 04027  
(207) 432-0029**

Name(s) Relinquisher(s): \_\_\_\_\_  
Name of Dog \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_  
Email: \_\_\_\_\_

*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 For Spoiled Pets LLC and that I have no further rights to this dog.
3. All decisions regarding the placement of this dog will be made solely by For Spoiled Pets LLC.
4. The Relinquisher has no rights to information regarding the adoption of this dog.
5. The Relinquisher guarantees to For Spoiled Pets LLC that this dog's history with regard to biting is accurately described as follows: To my knowledge, this dog:  
Has \_\_\_\_\_ Has Not \_\_\_\_\_ bitten anyone within 10 days.  
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 For Spoiled Pets LLC, 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 Owner/Relinquisher # 2 : \_\_\_\_\_ Date: \_\_\_\_\_

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Name of Dog: \_\_\_\_\_  
Microchip No.: \_\_\_\_\_  
Age: \_\_\_\_\_ Color: \_\_\_\_\_ Weight: \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_  
Altered? Yes \_\_\_\_\_ No \_\_\_\_\_  
Rabies Due Date: \_\_\_\_\_ DHPP Due Date: \_\_\_\_\_  
Bordatella Due Date: \_\_\_\_\_ Lyme Due Date: \_\_\_\_\_  
Leptosporosis Due Date: \_\_\_\_\_ Deworming Due Date: \_\_\_\_\_  
4DX Due Date: \_\_\_\_\_ Heartworm Preventive Due Date: \_\_\_\_\_  
Flea Preventive Due Date: \_\_\_\_\_

Please explain the following:

Current health problems:

\_\_\_\_\_

Medications: \_\_\_\_\_

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 obedience commands? \_\_\_\_\_

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? \_\_\_\_\_

Any other Information you feel would be helpful:

\_\_\_\_\_

Signature of Owner/Relinquisher: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Owner/Relinquisher # 2: \_\_\_\_\_ Date: \_\_\_\_\_