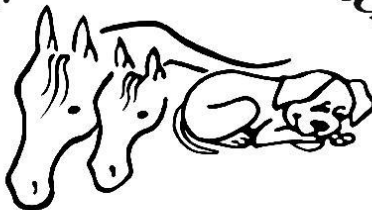


Last Chance Ranch



9 Beck Rd. Quakertown, PA 18951
215-538-2510 Fax: 215-538-2077

www.lastchanceranch.org
pets@lastchanceranch.org

Canine Surrender Form

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE # _____ CELL PHONE # _____

WORK PHONE # _____ EXT: _____

EMAIL _____

DOG'S NAME: _____ **AGE:** _____ **BREED:** _____

Why are you seeking a new home for your pet? _____

Up to date on vaccinations?: YES NO (if yes please provide a copy of records)

Spayed/Neutered? YES NO

Microchipped? YES NO If yes, microchip # _____

House trained? Yes, all the time Most of the time No

Bite History? No Yes If yes, Instance: _____

Temperament (Check all that Apply):

- | | | |
|---|---|---|
| <input type="checkbox"/> Protective | <input type="checkbox"/> Good for grooming | <input type="checkbox"/> Good for veterinarian/vaccines |
| <input type="checkbox"/> Friendly | <input type="checkbox"/> Good for nail trimming | Commands: |
| <input type="checkbox"/> Active | <input type="checkbox"/> Good with other dogs | <input type="checkbox"/> Sit |
| <input type="checkbox"/> Hyperactive | <input type="checkbox"/> Good with cats | <input type="checkbox"/> Stay |
| <input type="checkbox"/> Playful | <input type="checkbox"/> Good with younger children | <input type="checkbox"/> Down |
| <input type="checkbox"/> Quiet | <input type="checkbox"/> Good with older children | <input type="checkbox"/> Paw/Shake |
| <input type="checkbox"/> Calm | <input type="checkbox"/> Good with men | <input type="checkbox"/> Comes when called |
| <input type="checkbox"/> Nervous | <input type="checkbox"/> Good with women | <input type="checkbox"/> Walks well on leash |
| <input type="checkbox"/> Aggressive | <input type="checkbox"/> Good with strangers | <input type="checkbox"/> OK for car rides |
| <input type="checkbox"/> Aggressive towards strangers | <input type="checkbox"/> Food aggressive <input type="checkbox"/> People <input type="checkbox"/> Animals | <input type="checkbox"/> Heals when walking |
| <input type="checkbox"/> Aggressive towards dogs | <input type="checkbox"/> Toy possessive <input type="checkbox"/> People <input type="checkbox"/> Animals | Barks When: _____ |
| <input type="checkbox"/> Affectionate | <input type="checkbox"/> Jumps on people | _____ |
| <input type="checkbox"/> Quiet | <input type="checkbox"/> Chews-destructive | <input type="checkbox"/> Separation anxiety: _____ |
| <input type="checkbox"/> Lets you take toys away | <input type="checkbox"/> Scratches/digs-destructive | _____ |

Last Flea and Tick Application: _____ Last Heartworm Preventative Pill: _____

Referred by: _____