



Dog Relinquishment Application



YOUR NAME: _____
ADDRESS: _____
CITY, STATE, ZIP: _____
CELL/HOME PHONE: _____
EMAIL: _____

1. ARE YOU THE OWNER OF THIS DOG? Yes No How LONG HAVE YOU OWNED THIS DOG? _____

2. WHY ARE YOU NO LONGER ABLE TO KEEP YOUR DOG?

ABOUT YOUR DOG

3. NAME? _____ 4. BREED? _____
5. COLOR? _____ 6. HOW OLD IS YOUR DOG? _____
7. GENDER? MALE FEMALE 8. SPAYED/NEUTERED? Yes No

9. ABOUT YOUR DOG'S TEMPERAMENT

OUT IN PUBLIC, HOW DOES YOUR DOG REACT TO STRANGERS?

BACK AWAY ACT TIMID GROWL LUNGE SNAP FRIENDLY NO REACTION

IS YOUR DOG PROTECTIVE OF IT'S HOME AND/OR YOU? NOT AT ALL SOMEWHAT VERY

DOES YOUR DOG GET ALONG WITH OTHER DOGS ALL SOME ONLY FEMALE ONLY MALE DON'T KNOW

DOES YOUR DOG GET ALONG WITH CATS? Yes No DON'T KNOW

HAS YOUR DOG EVER BITTEN OR ATTEMPTED TO BITE A PERSON? Yes No

HAS YOUR DOG EVER GROWLED/SNAPPED/BITTEN WHEN ANYONE CAME NEAR IT'S TOYS, FOOD OR BONES? Yes No

IS YOUR DOG HOUSEBROKEN? Yes No IS YOUR DOG CRATE TRAINED? Yes No

HOW LONG IS THE DOG LEFT HOME ALONE? _____ WHERE IS THE DOG WHEN HOME ALONE? (CRATED/YARD/OTHER?) _____

HAS YOUR DOG LIVED WITH CHILDREN? Yes No WHAT AGES ARE THE CHILDREN? _____

HOW DOES YOUR DOG REACT TO CHILDREN? _____

HAS YOUR DOG EXHIBITED DESTRUCTIVE BEHAVIOR? Yes No IF YES, DETAILS? _____

DOES YOUR DOG PLAY WITH TOYS? Yes No

HOW IS THE DOG IN THE CAR? RELAXED NERVOUS BARKS GETS CAR-SICK OTHER? _____

IN THE CAR, IS THE DOG LOOSE CRATED SEAT-BELTED OTHER? _____

DO YOU HAVE ANY OTHER COMMENTS ABOUT YOUR DOG? _____

10. ABOUT YOUR DOG'S HEALTH

WHO IS THE VETERINARIAN FOR THIS DOG: DR. _____ PHONE: _____

HAS YOUR DOG SEEN A VET IN THE LAST 12 MONTHS? YES NO

DOES THIS DOG HAVE ANY MEDICAL ISSUES WE SHOULD BE AWARE OF, IF SO PLEASE BRIEFLY DESCRIBE?

FOOD: WHAT ARE YOU FEEDING? _____ HOW MUCH? _____ HOW OFTEN? _____

11. YOUR RECOMMENDATIONS FOR THE NEW OWNER

THIS DOG WOULD BE BEST IN WHAT KIND OF HOME? _____

WHAT ADVICE WOULD YOU GIVE TO YOUR DOG'S NEW OWNER: _____

MAY THE NEW OWNER CONTACT YOU BY PHONE? Yes No

>>>>PLEASE READ & SIGN<<<<

RELINQUISHMENT APPLICATION AND POLICIES

- I certify that I am the owner of this dog.
- I want to relinquish this animal to the San Clemente – Dana Point Animal Shelter. I understand that, after this dog has been in custody of the San Clemente-Dana Point Animal shelter for 30 days, I can no longer voluntarily claim the dog back into my possession.
- I understand that if the shelter personnel deem this dog un-adoptable for any reason and at any time, I will be required to retrieve this dog within 72 hours of notification from the shelter. I further understand that, if I do not retrieve this dog within the required period, **this dog may be euthanized.**
- I understand that the **fee to accept an owner-relinquished dog is \$100.00 and is non-refundable.**
- To the best of my knowledge, the information I provided on this form is accurate.*
- I understand that submission of this form does not guarantee that I will be able to relinquish this dog.*
- To the best of my knowledge this dog is under 7 years of age and free of medical or behavioral issues.*

ANIMAL OWNER'S SIGNATURE: _____ DATE: _____