



HOMES FOR ORPHANED PETS EXIST (H.O.P.E.)

P.O. Box 2497
Wilton, NY 12831
(518) 428-2994

Release and Surrender of Animal(s)

Date: _____

I, _____, an adult of legal age, do hereby voluntarily and irrevocably give, donate, surrender and release to Homes for Orphaned Pets Exist (hereinafter referred to as "H.O.P.E."), the following Animal(s) (hereinafter referred to collectively as "Animal(s)").

By completing and signing this form, you are stating that you are the legal owner of the Animal(s) that all the information (to your knowledge) is true and correct.

Description of Animal(s)

Pet's Name: _____ Species (Dog, Cat, Other): _____

Breed / Mix: _____ Color: _____

Age: _____ Gender: _____ Weight: _____

From whom/where was the Animal(s) obtained: _____

Health of Animal(s)

I have disclosed to H.O.P.E. all material information regarding the medical and behavioral history of the Animal(s). I willfully surrender all medical records and information pertaining to the Animal(s). H.O.P.E. has my permission to contact my veterinarian for any necessary information pertaining to my Animal(s), and I hereby consent to the release of any and all medical information by any medical provider.

Veterinarian/Clinic Name: _____ Telephone #: _____

Address: _____

Is the Animal(s) up to date on vaccinations? Yes No Unsure

Is the Animal(s) spayed or neutered? Yes No Unsure

Does the Animal(s) have any existing chronic (incurable) medical problem (including, but not limited to, thyroid disease, cancer, chronic infections)? Yes No Unsure

Does the Animal(s) have any existing acute (curable) medical problem (including, but not limited to, fleas or other skin irritations, intestinal parasites, weight loss, vomiting, diarrhea, respiratory or other infection)?
 Yes No Unsure

If the Animal(s) is a cat, has the cat tested negative for FIV/FelV within the past month?
 Yes No Unsure

If the Animal(s) is a dog, has the dog tested negative for Heartworm and Lyme within the past month?
 Yes No Unsure

Animal(s) Behavior

How is the Animal(s) with children? _____

How is the Animal(s) with dogs? _____

How is the Animal(s) with cats? _____

Has the Animal(s) ever shown any aggression (biting, snapping, growling) towards people or children?
 Yes No If yes, please describe the circumstances: _____

Has the Animal(s) ever bitten anyone? Yes No If yes, describe the circumstances: _____

Is the Animal(s) housebroken / litter box trained? Yes No

Does the Animal(s) need to be confined (crate, small room, etc.) when left alone?
 Yes No If yes, please explain: _____

Has the Animal(s) displayed any tendencies to climb, jump or dig under fencing, or to bolt out a door?
 Yes No If yes, explain: _____

Does the Animal(s) have any behavioral problems? Yes No If yes, please explain: _____

Please list the positive traits the Animal(s) has: _____

Please list the negative traits the (Animal(s) has: _____

Why is the Animal(s) being given up? _____

I state that all information is true and correct to the best of my ability. I further acknowledge that I am releasing the Animal(s) completely voluntarily and that no representations, considerations or promises of any kind have been made to me by H.O.P.E. I understand that by releasing the Animal(s) to H.O.P.E., I relinquish all ownership or other interest in the Animal(s). I will not seek further information about the Animal(s) and will not press H.O.P.E. for details. My contact with the Animal(s) terminates at the time of surrender. H.O.P.E. is under no obligation whatsoever to follow up with information about the Animal(s).

I hereby release and forever discharge H.O.P.E. from any and all rights, claims, obligations, liabilities, and causes of action whatsoever arising out of or relating to the ownership, possession, or disposition of the Animal(s), and I agree to indemnify and hold harmless H.O.P.E. from and against any and all such rights, claims, obligations, liabilities, and causes of action which may be asserted by third parties.

Name (Print): _____ Name (Signature): _____

Address (#, Street, City, State) _____

Telephone # _____ E-Mail Address: _____

H.O.P.E. Witness Name: _____ Witness Signature: _____