



Savannah, Georgia
Phone 912-665-6046
Email: info@renegadepawsrescue.org

Owner/Finder Surrender Statement

Owner/Finder Information

NAME: _____
STREET ADDRESS : _____
CITY/ STATE/ ZIP : _____
PHONE: (HOME): _____ (CELL): _____
EMAIL ADDRESS: _____

Basic Dog Information

DOG _____ PUPPY _____ AGE: _____ MALE _____ FEMALE _____

SPAYED/NEUTERED? Yes _____ No _____ Unknown _____

DESCRIPTION/COLOR/BREED: _____

NAME OF PET: _____

If found, what was the location and/or situation? _____

What kind of food (brand & type) has this animal been eating? _____

Special likes, dislikes, fears, needs, etc.: _____

Health/Veterinary Information

Does this animal have an established veterinarian? _____ If yes, please provide their name and phone number: _____

Is this animal up to date on vaccinations (rabies, DHPP, etc)? _____ If yes, what was the approximate date of the animal's last vaccination? _____

Has this animal been on monthly heartworm and/or flea preventative? _____ If yes, what brand(s) and what was the last date preventatives were given? _____

I hereby relinquish all ownership rights to the animal described herein to the custody of the Renegade Paws Rescue for disposition in accordance with the organization's policies. I acknowledge from this day forward, the legal owner of this animal is the Renegade Paws Rescue. I understand that I will not be able to readopt this animal. Should legal proceedings be necessary to enforce this release, I agree to pay the full cost of such proceedings including court costs and attorney's fees.

Signed _____ Date _____

Witness _____ Date _____

OFFICE USE ONLY

RPR Dog Name: _____

Microchip #: _____