

# APPLICATION FOR SURRENDER

Please answer this as completely and honestly as possible in order to assist MTGRR in finding the very best new home for the dog.



Dog's name \_\_\_\_\_ Is this dog spayed/neutered? **Yes / No**

Sex \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_ ( \_\_\_ exact or \_\_\_ approx?)

Description of Dog (color, weight) \_\_\_\_\_

How old was the dog when you acquired it? \_\_\_\_\_

Where did you acquire this dog: \_\_\_\_\_

Name and address of breeder (if applicable) \_\_\_\_\_

Are registration papers available? **YES / NO**

Information on most recent vaccinations (please attach copies of vet records if avail):

VACCINATION / TREATMENT	DATE GIVEN	GIVEN BY:
Annual shots (e.g. DHLPP)	___ / ___ / ___	
Rabies vaccination	___ / ___ / ___	
Bordatella (kennel cough)	___ / ___ / ___	
Last Heartworm test	___ / ___ / ___	
Last fecal float	___ / ___ / ___	
last heartworm pill (e.g. heartgard)	___ / ___ / ___	
Last tick / flea treatment (e.g. frontline)	___ / ___ / ___	

Name of primary veterinarian \_\_\_\_\_ Phone # \_\_\_\_\_

Does the dog have chronic ear infections? **YES / NO**

Hot spots/skin problems? **YES / NO**

Other problems? (please explain) \_\_\_\_\_

What brand of dog food? \_\_\_\_\_ How much do you feed? \_\_\_\_\_

How many times a day and at what times is your dog fed? \_\_\_\_\_

Where does the dog sleep at night? \_\_\_\_\_

Where does the dog live/stay during the day? \_\_\_\_\_

**Does your dog:**

Like to ride in cars? **YES / NO**

Like to swim? **YES / NO**

Jump fences? **YES / NO**

Dig? **YES / NO**

Let you take toys away? **YES / NO**

Chase cars? **YES / NO**

Urinate when scared? **YES / NO**

Come when called? **YES / NO**

Growl at strangers? **YES / NO**

**Is your dog ... (Y/N):**

Housebroken? **YES / NO**

Afraid of storms? **YES / NO**

Used to children? **YES / NO**

Good with children? **YES / NO**

Good with cats? **YES / NO**

Good with other dogs? **YES / NO**

Used to being groomed? **YES / NO**

Used to being walked? **YES / NO**

Crate trained? **YES / NO**

Obedience trained? **YES / NO**

What commands does your dog know?

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Has the dog ever bitten anyone? **YES / NO** If yes, explain the circumstances:

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What are the dog's best/worst points?

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What does the dog like/dislike?

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List any other information that might be helpful for placement or for new owners

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Why are you giving this dog up?

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**ATTESTATION BY THE RELINQUISHING OWNER(S):**

I / We certify that I / we own the above dog and that this dog has not shown any signs of aggression or bitten anyone and that the statements above are true and accurate. I / We agree to indemnify and hold harmless Middle Tennessee Golden Retriever Rescue (MTGRR) by, from and against all claims, suits, damages, liabilities and costs related to or in any manner connected with this dog. I / We further acknowledge understanding that the dog becomes the property of MTGRR, and that they may place the dog, spay/neuter, or euthanize if in the best interest of the dog.

Date this for is being completed: \_\_\_\_\_

Print owner's name \_\_\_\_\_ Signature: \_\_\_\_\_

Co-owner's name \_\_\_\_\_ Co - Signature: \_\_\_\_\_

Email Address \_\_\_\_\_

Copies of most recent vet records are attached (check one): \_\_\_\_ YES \_\_\_\_ NO

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone# \_\_\_\_\_ Secondary Phone# \_\_\_\_\_

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Signature of MTGRR Representative \_\_\_\_\_