

# Yellowstone Valley Animal Shelter Surrender Agreement

Date \_\_\_\_\_ Time \_\_\_\_\_ Species: Dog  Cat  Other \_\_\_\_\_  
Animal Name \_\_\_\_\_ Age \_\_\_\_\_  
Breed \_\_\_\_\_ Color/Markings \_\_\_\_\_  
Sex: Male  Female  Spayed/Neutered: Yes  No

### REASON FOR SURRENDER

Please check all that apply and then explain in the space provided below.

- New baby  Landlord  Moving  Behavior  Cost  Medical (pet)  Medical (person)  Not Owner  
 Other \_\_\_\_\_

### **Owner**

*By initialing the following statements I understand and abide by this document:*

\_\_\_\_\_ I am the owner of the animal described above to Yellowstone Valley Animal Shelter (YVAS).

\_\_\_\_\_ I hereby relinquish all rights of ownership and any right to information on the disposition of the animal described to YVAS.

\_\_\_\_\_ I authorize the release of any veterinary records regarding the animal.

\_\_\_\_\_ I certify that to the best of my knowledge, I have disclosed all of the information about the animal concerning health, behavior, history and anything else that may affect the safe placement of the animal in a new home.

\_\_\_\_\_ I understand that if this animal is deemed not adoptable by YVAS, or cannot be transferred to an approved rescue organization, the animal may be humanely euthanized.

\_\_\_\_\_ If I am unable to be present at the time of surrender I give permission for \_\_\_\_\_ to surrender my animal on my behalf.

Would you like us to contact you if your animal is determined to not be an adoption candidate?  Yes  No

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

### **Owner Proxy**

*By initialing the following statements I understand and abide by this document:*

I am surrendering this animal on behalf of the owner-

Name \_\_\_\_\_ Phone \_\_\_\_\_

I understand that if the owner has not signed off (above) on the release of this animal that s/he will be held for 72 hours at which time the animal will be considered abandoned and property of YVAS per city ordinance.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_