

# DOG SURRENDER / INTAKE FORM

Today's date:

## CONTACT INFORMATION\*

*\*Information of individual(s) who is surrendering the dog. Must have current legal custody of the dog in order to surrender.*

First Name:  Last Name:

Address:

City:  Province:  Postal Code:

Cell Phone:  Alternate #:

Email:   Home  Work  Other Cell

Please indicate your preferred method of contact:  Cell #  Alternate #  Email

## PET INFORMATION

Name:  Breed:

Birth date:  Sex:  Male  Female

Approx age:   Neutered  Spayed  Intact

Approx weight:  Age at spay/neuter surgery:

1) Does the dog have a tattoo and/or microchip?  Tattoo  Microchip  None

If yes, please provide:  Tattoo #:

Microchip #:

2) Is the dog licensed?  Yes  No

City:

License #:

3) What is your dog's diet (type & frequency)?

4) Is this your first dog?  Yes  No

5) How long have you had this dog?

6) Where did you get this dog?

7) What was the main reason you got this dog?

8) Please tell us why you need to give up your dog:

## MEDICAL HISTORY

1) What is the dog's most recent vaccination history?

<input type="checkbox"/> DA2PPV	Date Vaccinated: <input type="text"/>	<input type="checkbox"/> Not done/unknown
<input type="checkbox"/> Kennel Cough	Date Vaccinated: <input type="text"/>	<input type="checkbox"/> Not done/unknown
<input type="checkbox"/> Rabies	Date Vaccinated: <input type="text"/>	<input type="checkbox"/> Not done/unknown

2) Does the dog have allergies?  Yes  No Allergic to:

3) When was the dog's last visit to the veterinarian?

4) Please tell us about any medical issues the dog might have now, or had in the past:

5) Please provide your veterinarian's information:

Clinic/Hospital Name: <input type="text"/>	
Veterinarian: <input type="text"/>	Phone #: <input type="text"/>

## HOUSEHOLD HISTORY

1) Please list all people, and their ages, who live in the household with the dog:

2) How long is the dog left alone each day?

3) When left alone at home, where does the dog stay?

4) Where does the dog sleep at night?

5) Do you use, or have you ever used, a crate for this dog?  Yes  No

If yes, how does the dog behave when crated?

6) Do you have a yard?  Yes  No

If yes, do you leave the dog alone in the yard?  Yes  No For how long?

Is the dog loose or tied up in the yard?

7) How many times has the dog escaped from the yard or your property?

8) What does the dog chew on when left alone?

## INCIDENT HISTORY

1) Has a complaint ever been filed with animal services regarding this dog?  Yes  No

If yes, please provide the details:

2) How many people has this dog nipped, mouthed, bruised and/or scratched with their teeth?

Please explain what led up to this/these incidents:

3) Has this dog ever broken a person's skin with his/her teeth?  Yes  No

If yes, please explain the situation:

4) Has this dog ever injured another animal?  Yes  No

If yes, please describe what occurred:

5) How many fights has this dog had with other dogs?

6) Has this dog injured another dog in a fight?  Yes  No

If yes, please describe the situation, the resulting injury/injuries and the treatment either dog received:

## BEHAVIOUR HISTORY

1) Has the dog attended obedience and/or training course(s)?  Yes  No

If yes, please tell us how old the dog was, the course name and the instructor/training Centre name:

2) Do you walk this dog?  Yes  No  On-leash  Off-leash  Both

3) Does the dog get other forms of exercise (other than walks)?  Yes  No

If yes, please describe what kind of exercise and how often:

4) How many hours of exercise a day do you give this dog (walks and other forms)?

5) Does the dog meet other dogs on walks?  Yes  No

If yes, please briefly describe the dog's reaction to other dogs while:

On leash:

Off-leash:

6) Do you let the dog sniff/touch/play with other dogs?  Yes  No

If yes, please describe the dog's play/interaction style:

7) Does the dog have another dog as a special playmate?  Yes  No

If yes, what is the playmate's:

Breed:

Age:

Gender:

Describe how, and what they do, when they play together:

8) How does the dog react to puppies?

9) Does the dog have experience living/interacting with cats?  Yes  No

If yes, please describe how the dog responds/reacts to cats:

10) Does the dog have experience living/interacting with other animals?  Yes  No

If yes, please list the animals and how the dog responds/reacts to that animal:

11) Does the dog have any experience with children?  Yes  No Ages?

Describe the dog's behaviour when interacting with children:

12) How does the dog react when visitors come to your home?

13) Do visitors bring their dog(s) to your home?  Yes  No

If yes, how does the dog react?

14) When you/your household are eating, where is the dog?

15) Does the dog enjoy food?

16) What is the dog's favourite:

Food/Treat:

Toy:

Game/Activity:

17) When someone tries to take something away from the dog (i.e. food, bone, toy) how does the dog respond?

18) If the dog picks something up you don't want them to have (eg. bone, garbage, shoe), how do they react when you try to take it from their mouth?

19) Is the dog frightened by any noise?

20) Is the dog frightened/nervous around anything else?

21) What areas of the dog's body does s/he NOT like you to touch? Explain how you know.

22) Where does the dog urinate and defecate?

23) How many house-soiling mistakes does the dog make each week?

24) How do you correct the dog when s/he does something wrong?

25) The dog is trained on (check all that apply):  Leash  Flexi  Collar  Harness  Halti

Muzzle  Other:

26) Which DOGS cause the dog to bark, growl, lunge, snap, cower or tremble?

27) Which PEOPLE cause the dog to bark, growl, lunge, snap, cower or tremble?

28) If you could change one thing about the dog's behaviour, what would it be?

29) Tell us your favourite thing about the dog:

30) What do you think the ideal home for the dog would look like?

31) If you were placing an ad to re-home the dog, what would it say about him/her?

32) How much longer can you keep the dog in your home?

*Thank you for completing this profile. Submission does not guarantee the Bow Valley SPCA will accept your dog. Admissions are limited. Acceptance may be conditional based on the outcome of a behavioural assessment.*

*A representative from the Bow Valley SPCA will review your responses and will contact you by phone or email.*

**OFFICE USE** TO BE SIGNED AT THE TIME OF SURRENDER/INTAKE.

**I, the undersigned, having care and/or control of the above-described animal (the "Dog") hereby surrender the Dog to the Bow Valley SPCA and do hereby release the Bow Valley SPCA, its Directors, employees, members and agents from any liability relating to the Dog. The undersigned understands that the Bow Valley SPCA will make reasonable efforts to facilitate the adoption of, or humanely euthanize, the Dog (based on health and temperament) at the sole discretion of the Bow Valley SPCA. The Bow Valley SPCA will not knowingly release the Dog for medical or veterinary experimentation.**

I certify that all statements above are true and correct.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*BVSPCA Centre Manager Signature*

\_\_\_\_\_  
*Name (printed)*

\_\_\_\_\_  
*Signed date*

## SURRENDER POLICY & REQUIREMENTS

Please read carefully the Bow Valley SPCA Surrender Policy and Requirements. Individuals wishing to surrender their pet(s) **must** agree for their application to be considered complete.

As the legal owner of the dog I am seeking to surrender, I understand and agree that:

- Completion of this Dog Surrender Request form is not an acceptance of my request for surrender, or an agreement by the Bow Valley SPCA to take my dog.
- Surrender is by scheduled appointment ONLY. The Bow Valley SPCA cannot and will not accept walk-in or day-of surrenders.
- I may be placed on a waitlist, due to the limited capacity at the Bow Valley SPCA.
- The approval of my application will be based on a behaviour assessment of my dog. The Bow Valley SPCA has the right to refuse my request if they determine that my dog will not thrive in their Centre and/or is dangerous to staff and resident animals.
- I have pursued alternative options to surrendering my dog, and agree to discuss these with the Adoption Centre Manager as part of my application process.
- I have provided true and accurate information in this application, and have provided all medical records available for this dog.
- Once my dog has been surrendered, I agree I am signing over full ownership and will not have any right of decision making or contact with my dog.
- I will not be allowed to visit my dog after it has been surrendered to the Bow Valley SPCA. I understand this is for the mental and emotional well-being of my dog, as it can be very confusing for a dog to be surrendered and visited by their former owner.
- It is the decision of the Bow Valley SPCA and the future adopters of my dog, whether or not updates about my dog are provided to me.
- Repeated and continual surrender of animals will not be tolerated or accepted by the Bow Valley SPCA.
- As I have surrendered an animal to the Bow Valley SPCA, they have the right to refuse any future interest in, or application for, adoption of any cats or dogs at the Bow Valley SPCA at their discretion.

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*Signature*

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*Signed date*

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*Name (printed)*