



Franklin County Humane Society

Dog - Owner Surrender Form

Please be honest with your answers. What may be a problem for you, may not be a problem for another family. Your information will help us match your pet with a new family and help make the transition into a new home as smooth as possible for your dog.

Your Name _____

Address _____

City/State _____ Zip Code _____

Phone #: Mobile _____ Home _____ Work _____

Email _____

Are you the owner of this dog? Yes No If No, please explain _____

Dog's Name _____ Breed(s) _____ Female Male

Neutered/Spayed? Yes No Age/Birthdate _____ Color(s) _____

Micro-chipped? Yes No If Yes, microchip # & Company name _____

Was this dog adopted from the Franklin County Humane Society? Yes No If Yes, when _____

If No, where did you get this dog? _____

How long have you owned this dog? _____

Reason you need to surrender this dog: _____

Name of Veterinarian _____ Phone _____

Does this dog have to be muzzled at the veterinarian? Yes No Other _____

Does this dog have any past or present medical conditions? Yes No If Yes, please explain _____

What type of food does this dog eat? *(Please check all that apply)*

Dry Wet/canned Table scraps Special diet, *(Please explain)* _____

Where does this dog spend most of his/her time? Hours inside _____ Hours outside _____

Inside house, runs free Inside house, crate trained Other *(Please explain)* _____

Outside house, free in yard Outside in kennel Other *(Please explain)* _____

Is this dog an "escape artist"? Yes No If Yes, please explain _____

*Is this dog housetrained? Yes No

