



Healing with **E**mpathy and **A**nimal **L**ove

Phone: (646) 425 0063
info@healsanctuary.org
www.healsanctuary.org

H.E.A.L SANCTUARY DOG TEMPORARY RELINQUISHMENT FORM

Thank you for entrusting your precious dog to our sanctuary so that he or she may have a temporary safe haven till he or she can come back home to you. Our mission is to care for your dog till you are able to take him or her home. If at any point you feel that you cannot provide a safe home for your pet we will find him or her the best family possible for a great match. However, **H.E.A.L Sanctuary** will not accept dogs, even on a temporary basis that are aggressive with other animals or with people.

I, _____, certify that I am the sole and legal owner of this dog and hereby temporarily give physical custody to **H.E.A.L Sanctuary** of the dog known as _____. I hereby turn over temporary ownership and responsibility as of this date: _____. I understand that the contract is effective immediately from this date. I also understand that with this instrument the dog becomes the property of **H.E.A.L Sanctuary** till this date: _____, when I will reclaim this dog. I am donating \$ _____ towards the temporary care of my dog.

Witness:

Signature of Owner:

Address of Owner:

Telephone Number of Owner

Release of Veterinary Records

Owner's Clinic Address and Phone Number:

I hereby authorize the veterinarian named herein to release information about me or my pet(s) to **H.E.A.L Sanctuary** as necessary to evaluate this application.

PLEASE FILL OUT THE FOLLOWING SECTION TO HELP CARE FOR YOUR DOG

(Check all that apply; add any helpful information where you can.)

Age of dog:

- 8 wks -6 mos 6 mos-1 yr 1-5 yrs 5-10 yrs+ 10 yrs+

Size of dog:

- < 20lbs 20-50lbs 50lbs+

Type of dog (please give details):

- Purebred (_____) Mix-breed (_____ mix)

Socialization - Your dog likes:

- | | | |
|--|-----------------------------------|------------------------------------|
| <input type="checkbox"/> Other dogs | <input type="checkbox"/> Cats | <input type="checkbox"/> Children |
| <input type="checkbox"/> Walks | <input type="checkbox"/> Play | <input type="checkbox"/> Strangers |
| <input type="checkbox"/> Riding in the car | <input type="checkbox"/> Swimming | <input type="checkbox"/> Other |

Has your dog been (check all that apply):

- | | | |
|--|---|--|
| <input type="checkbox"/> Housedog | <input type="checkbox"/> Crated | <input type="checkbox"/> Tied/Chained in house |
| <input type="checkbox"/> Yard at all times | <input type="checkbox"/> Yard part-time | <input type="checkbox"/> Doghouse |
| <input type="checkbox"/> Loose in yard | <input type="checkbox"/> Tied/Chained in yard | <input type="checkbox"/> Loose in neighborhood |
| <input type="checkbox"/> Other | | |

Habits (check all that apply):

- | | | |
|--|--|--|
| <input type="checkbox"/> House-trained | <input type="checkbox"/> Howling | <input type="checkbox"/> Barking |
| <input type="checkbox"/> Runs | <input type="checkbox"/> Escape artist | <input type="checkbox"/> Digging |
| <input type="checkbox"/> Jumps fences | <input type="checkbox"/> Jumps on people | <input type="checkbox"/> Gets out to follow people |
| <input type="checkbox"/> Gulps food | <input type="checkbox"/> Finicky eater | <input type="checkbox"/> Used to collar and leash |
| <input type="checkbox"/> Walks nicely on leash | <input type="checkbox"/> Chewing | <input type="checkbox"/> Destructive |
| <input type="checkbox"/> Likes the outdoors | <input type="checkbox"/> Signals to go out | <input type="checkbox"/> What signal? |
| <input type="checkbox"/> Training | <input type="checkbox"/> Tricks | <input type="checkbox"/> Other |

Temperament:

- | | | |
|---|---------------------------------------|--|
| <input type="checkbox"/> Friendly | <input type="checkbox"/> Enthusiastic | <input type="checkbox"/> Anxious to please |
| <input type="checkbox"/> Happy-go-lucky | <input type="checkbox"/> Suspicious | <input type="checkbox"/> Cautious |
| <input type="checkbox"/> Aggressive | <input type="checkbox"/> Shy | <input type="checkbox"/> Reserved |
| <input type="checkbox"/> Protective | <input type="checkbox"/> Stubborn | <input type="checkbox"/> Very trainable/Obedient |
| <input type="checkbox"/> Calm | <input type="checkbox"/> Adaptable | <input type="checkbox"/> Stubborn |
| <input type="checkbox"/> Mellow | <input type="checkbox"/> Lethargic | <input type="checkbox"/> Hyper |

Can you add anything to describe the dog's general temperament?

Has the dog ever bitten a person?

- Yes No If yes, explain: _____

Action taken? _____

Medical History:

Veterinarian: _____

Address: _____

Phone: _____

Shots (Which)? _____

When? _____ Rabies Shot? _____

Date: _____ By: _____ Expires: _____

Heartworm test? _____ Date: _____ Positive/negative: _____

Is this dog on heartworm preventative? _____ If so, dose/brand: _____



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Fecal exam date: _____ Results: _____

Spayed/Neutered? _____ Date: _____

AKC papers, if any? _____ Number: _____

Other medical history (illness, allergies, injuries, physical problems): _____

Food & Medication:

Type of food? _____ Number of feedings per day? _____ Amount _____

Type of Medication: _____ Dose: _____

Reason for temporary relinquishment: _____

Items given with dog:

Leash? _____ Collar? _____ Toys? _____ Describe Toys: _____ Blanket? _____

Crate? _____ Food? _____ Describe Food: _____

Other: _____