



141-616 NPO / PBO 93004997

5a Lancaster Road

Kenilworth

7708

ANIMAL SURRENDER AGREEMENT

Name and Surname:

ID Number:

Contact Number:

Home Address:

Email Address:

Fact Sheet:

Please complete the fact sheet below fully and honestly. Please complete one form per dog. The information provided will help us to determine the type of family that would be best suited to him/her. Please provide a few attractive photos of the dog with the completed surrender form. Please also include the dog's vet book or obtain a written record from your vet. If the dog is microchipped, please provide number below :

Name of dog	
Breed of dog	
Sex of dog	
Is dog sterilised?	
Age of dog	
Number of dogs in home	
Socialised with dogs	
Socialised with cats	
Approximate weight of dog	

Socialised with other animals	
Socialised with small children	
Type of food being fed	
Feeding schedule	
Food aggression	
Is dog on any medication?	
Date of last vaccination	
Date of last deworming	
Does dog have allergies?	
Any no touch zones on body	
Is dog leash trained?	
Is dog house trained?	
Where does dog sleep?	
Likes / Dislikes / Behaviour	
How long has dog been living with you?	
What is the reason for surrendering dog?	

Declaration:

- I agree to surrender the above mentioned dog to Cape Dachshund Rescue unconditionally and I understand that I will have no further claim to the dog once he/she has been surrendered.
- I understand that I cannot expect updates about the dog once he/she has been surrendered.
- I accept that I will not be entitled to the new owner's details.
- I warrant that I am the sole owner of the dog. If I am not the owner, or if the dog is co-owned by me, I attach the written consent of the owner/co-owner to this surrender agreement. The surrender will become final upon my signature and, if appropriate, by the receipt by Cape Dachshund Rescue of the owner/co-owner's written consent. Once the surrender is complete, the dog becomes the property of Cape Dachshund Rescue, and I will have no further claims or rights to the dog

Signature of Owner: _____

Date: _____

Witness: _____

Should you wish to make a donation towards the sterilisation and vaccinations of our rescue dogs, our banking details are as follows :

Account name : Cape Dachshund Rescue

Bank : First National Bank

Account number: 62506961764

Branch code : 250655

Reference : Your Surname & Donation