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| **EPSOM CANINE RESCUE** |
| SURRENDER FORM |
| Please answer all questions fully as this information helps us to rehome your dog in a suitable environment. Please remember it is in your dog’s best interests to be honest as it is very unsettling for a dog to be passed from home to home due to misinformation being given.The Information provided will be used to match the dog with potential foster homes as well as finding them a permanent placement, hence the detailed questions, so please provide full and frank answers. |

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| **Dog’s details** |
| Dog’s name |  |
| Breed  |  |
| Age |  |
| Sex |  |
| Microchip no. |  |
| Weight (kg) |  |
| Height to shoulders (cm) |  |
| Length (cm) |  |
| Where did you get the dog from? |  |
| How old were they when you got them? |  |
| What do you know of you your dog’s prior history? |  |
| What is the dog currently fed on? |  |
| Where does the dog sleep (room and place) |  |
| What is the dog’s current daily routine |  |
| What is the reason for rehoming |  |

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| **Owner’s details** |
| Name of owner |  |
| Address with postcode |  |
| Telephone numbers (landline and mobile)  |  |
| Email address |  |
| Family makeup*(for example: husband, partner, children (inc ages)* |  |

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| **Behaviour with other dogs** |
| Do you have any other dogs in the home (including regular visitors)?*If yes, please provide details**(breed, sex, age and whether neutered)* |  |
| Is the dog you are looking to re-home good with other dogs in the home (resident or visitors)*If not, please provide full details* |  |
| Is the dog you are looking to re-home good with other dogs outside of the home?*If not, please provide full details* |  |
| Has the dog ever bitten another dog?*If yes, please give full details or circumstances and if veterinary treatment was required for either dog.* |  |

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| **Health** |
| Is the dog vaccinated? |  |
| When are vaccinations next due? |  |
| Is the dog regularly treated for worms & fleas?*If yes what do you use & when were they last treated?* |  |
| Has the dog had any illnesses?*If yes, please give details* |  |
| Has the dog had any operations?*If yes what and when* |  |
| Is the dog insured? *If yes, which company?* |  |
| Is the dog currently on any medication?*If yes, please detail* |  |
| Does the dog have any allergies?*If yes, please detail* |  |
| Is the dog spayed/neutered?*If yes, when was this done?* |  |
| If your Dog is not spayed/neutered &/or vaccinated, are you prepared to pay to have this done?Please be aware that it is rescue policy that all dogs are neutered/spayed & vaccinated prior to finding new homes). As a charity we rely solely on donations to pay for these procedures, so if you are unwilling to fund the costs it may affect our ability to take your dog |  |
| What is your vets name and address |  |

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| **Training/behaviour** |
| Is the dog-house-trained? |  |
| Is the dog good in the car |  |
| Does the dog guard toys/food |  |
| Is the dog crate trained? |  |
| Is the dog good off the lead? |  |
| Does the dog know any commands?*If yes, which?* |  |
| Can the dog be groomed? |  |
| Is the dog good with children?*If not, please elaborate* |  |
| Is the dog good with strangers?*If not, please elaborate* |  |
| Is the dog good at the vets?*If not, please elaborate* |  |
| Does the dog live with cats or any other animals?If yes, please give details |  |
| If they don’t live with cats, what is their usual reaction to seeing them? |  |
| Is the dog excitable? |  |
| Is, or has, the dog ever been destructive or chewed things they shouldn’t (beyond the puppy stage)?*If yes, please give details* |  |

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| **Training/behaviour (continued)** |
| How often, and for how long, is the dog usually left alone? |  |
| When left alone, do they whine, bark, be destructive or similar? |  |
| Does the dog dig in the garden? |  |
| Has the dog ever bitten anyone?*If yes, please give full details or circumstances and treatment required* |  |
| Is the dog vocal? |  |
| Is the dog a jumper? |  |
| Is the dog an escape artist or do they generally respect doors and boundaries? |  |
| Any special likes/dislikes |  |
| Please confirm that the vaccination card and microchip transfer paperwork are in your possession and will be passed to Epsom Canine Rescue |  |

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| **Other supporting information** |
| Please detail any other background/useful information  |  |
| How did you hear about Epsom Canine Rescue? |  |

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| **PLEASE DON’T FORGET TO INCLUDE PHOTOGRAPHS WHEN RETURNING THE FORM** |
| Please email your completed form to nikki@epsomcaninerescue.co.ukThank you |

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| **EPSOM CANINE RESCUE** |
| DISCLAIMER FORM |

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| Dog’s name |  |

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| I, |  | ( name in Capitals) |
| of |  | (address inc postcode) |
| as the legal owner, hereby disclaim all rights of possession, ownership and control of this dog to Epsom Canine Rescue and understand that I have no further legal claim to the dog. I understand that upon signing this disclaimer form I no longer have any legal entitlement to have the dog returned to me or to exercise any other rights over the dog.I also hereby confirm that the information on the Epsom Canine Rescue Surrender Form is true and accurate to the best of my knowledge and belief. Owner ECR representative Date ………………………… |
| In order to help cover our costs we ask for a minimum rehoming fee of.............payable to Epsom Canine Rescue. |