



Animal Surrender Form

11878 PA 85, Kittanning, PA 16201 724-548-4520 | www.orphansofthestorm-pa.org
Humane Police Officer O'Donnell, phone 724-954-9515, email HumaneOfficerAC@gmail.com

This form will find your animal a new home. **PLEASE BE HONEST** to help us place your animal with people who understand its shortcomings, achievements and help to avoid the animal being returned to the shelter.

Please feel free to continue any of your answers on the back.

1. Type of animal: _____
2. What breed is the animal? _____ Sex: _____
3. What color is the animal? _____
4. How old is the animal? _____
5. Where did you obtain the animal? _____
6. Why are you giving up the animal? _____
7. Is the animal an inside or outside animal? _____
8. Is the animal afraid of anything? _____
9. Has the animal been with other animals? _____ What kind? _____
10. Is the animal good with children? ____ If yes, what are ages of children animal has been around? _____
11. Has the animal shown any aggressive/nasty tendencies? If yes, please explain: _____
12. When was the animal's last veterinarian visit/ veterinarian's name? _____
13. Is the animal current on vaccinations and wormings? _____
14. Does the animal have any known health problems? If yes, please explain _____
15. Is the animal spayed or neutered? _____ If yes, do you have the certificate? _____
16. What do you feed the animal? _____ How much? _____ How often? _____

I, the undersigned, certify that I hereby surrender all my interest of the above animal (s) to Orphans of the Storm, Inc. (OOTS) I do so voluntarily, without duress or coercion, and without expectation of any influence in charges that may be filed. *(Initial)* _____ All animals thus relinquished become at once the property of OOTS. It is expressly agreed that said OOTS will incur no obligation to me on account of such disposition of the of the (these) animal(s). I grant permission for OOTS to use images of the above animal(s) in any format, in any and all media, for any purpose.

PLEASE PRINT:

Name: _____ Date: _____

Address: _____ City: _____ State _____ Zip: _____

Phone(s): _____ email: _____

Signature: _____

Received by: _____ Donation: _____