



9 Beck Road Quakertown PA 18951 Phone: 215-538-2510 Fax: 215-538-2077 emily@lastchanceranch.org

Please complete this form and fax or email along with pictures. Surrender forms take a minimum of 3 days to review.

Owner's Information

Name: _____ Phone: _____ Email: _____

Address: _____ State: _____ Zip Code: _____

Dog's Basic Information

Name: _____ Breed: _____ My dog is a (please circle): Male Female

My dog is (please circle): Spayed Neutered Not Altered (intact) Age: _____ Is this dog microchipped? Yes No

How long have you had this dog?: _____ Where did you get this dog?: _____

Why are you surrendering this dog?: _____

Dog's Medical Information

What vet do you use for this dog (clinic name and phone number): _____

Is this dog up to date on vaccines (if so, list which vaccines): _____

Has this dog bitten? (If yes, please explain circumstances and dates): _____

Does this dog have/had any known medical issues? (If yes, please explain): _____

What do you feed this dog? (wet/dry, brand, how often, amount): _____

Date and brand of last application of flea/tick treatment : _____

Date and brand of last dose of heartworm preventative: _____

Dog's Behavioral Information

Does this dog have any of the following behavioral issues? Please explain each issue. (Please be honest, it will let us know what things we should work on with the dog)

Separation or Other Anxiety, explain: _____

Chewing, explain: _____

Barking, explain: _____

Digging, explain: _____

Inappropriate Urinating, explain: _____

Chasing (cars, animals, people, etc), explain: _____

Protective of house, family, etc, explain: _____

Biting, explain: _____

Aggression, explain: _____

Fear of loud noises/objects, explain: _____

Possessive of food, toys (with people or animals), explain: _____

Lets you take food/toys away: _____

Good for grooming, nail trims, etc: _____

Good with kids (list ages they have lived with/met if applicable): _____

My dog is (please circle all that apply): friendly active hyperactive playful quiet calm nervous
affectionate jumps on people

How does this dog respond to:

Cats _____ Other Dogs _____

Strangers _____ Children _____

Has this dog ever killed or injured another animal? (please circle) No Yes IF YES please explain: _____

Dog's Training Information

Is this dog housebroken? (please circle) Yes No Is this dog crate trained? (please circle) Yes No

Has this dog had any formal obedience training? (please circle) Yes No IF YES please list where the dog and for what (basic obedience, specific problem, etc): _____

Does this dog know any commands? No Yes, please list _____

Can this dog be trusted to be home alone for extended periods? (please circle) Yes No