



PO Box 252 Manchester TN – 931-728-0903

### Coffee County Humane Society (CCHS) Surrender Contract

By the signing of this contract, I/we relinquish all rights of ownership of the dog/cat, presently known as \_\_\_\_\_ to the coffee county Society, hereinafter the CCHS, and do hereby certify to the best of our knowledge, that this dog/cat/horse has never bitten anyone. Further, it is understood and agreed that the CCHS was contacted with the express purpose of releasing our rights of ownership, and that this agreement was entered into of our own free will, is binding and permanent. CCHS agrees to accept responsibility for the care of said dog/cat until such time as she/he is placed in an appropriate, living home with approved adopters. It is also explicitly understood that if, on the advice of CCHS’s veterinarian, said dog/cat/horse cannot be rehabilitated to a state of good health that she/he may be humanely euthanized at the sole discretion of CCHS. I/we also certify that the following information given below is an accurate and true to my ability. I/we also agree to contribute \$ \_\_\_\_\_ as a donation to CCHS.

DOG/CAT Name \_\_\_\_\_ Age \_\_\_\_\_ Male/Female \_\_\_\_\_ DOB (if known) \_\_\_\_\_ Spayed/Neutered Yes  No

Current on Vaccinations Y  N  Date due for Vaccinations \_\_\_\_\_ Date of last Heartworm test \_\_\_\_\_

Preventative Yes  No  Brand of Preventative \_\_\_\_\_ Date of last Preventative treatment \_\_\_\_\_

House trained? Yes  No  Crate Trained? Yes  No  Obedience Training? Yes  No  Brand of Food \_\_\_\_\_

Does the cat/dog know its name? Yes  No  Prefers the company of: Men  Women  Children  No Preference  Other Animals

Is the cat/dog good with Children? Yes  No  Animal Personality: Dominant  Submissive  Well-adjusted/socialized

Describe personality (even if negative) - this helps with placement: \_\_\_\_\_

Is the cat/dog okay with other animals? Yes  No  Are there any particular fears for the animal? Yes  No

Behavioral concerns: \_\_\_\_\_

Do they need to be addressed? Yes  No  \_\_\_\_\_

Any health conditions or Medications? Yes  No  \_\_\_\_\_

DOGS: Do they jump or climb fences? Yes  No  Dig our under fences? Yes  No  Considered and escape artist? Yes  No

Does he/she bark-howl when left alone? Yes  No  Can the dog be left alone in the house? Yes  No  How Long? \_\_\_\_\_

Does well in yard without supervision for short/long periods of time? Yes  No  How long? \_\_\_\_\_

If out of fenced in yard, does he/she respond when called? Yes  No  Suffer from separation anxiety? Yes  No

If so, behavior \_\_\_\_\_

Do they know simple commands? (sit, lay down, heel, etc) Yes  No  and response: \_\_\_\_\_

What are/is the animal’s favorite things, toys, games, companions, etc? \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Phone- Cell \_\_\_\_\_ Home \_\_\_\_\_

Name of CCHS Representative: \_\_\_\_\_ Date \_\_\_\_\_

Signature: \_\_\_\_\_