



The Biscuit Foundation

Helping people and their pets... one paw at a time

Date: ____ / ____ / ____

Case Number _____

The Biscuit Foundation
P.O. Box 2281
Burlington, NC 27216
Phone: 336-266-6000

Surrender Form

I, _____, am surrendering my pet, _____, as I am no longer able to provide the proper care necessary to ensure an adequate quality of life or to ensure my pet's safety. I understand that I am giving up all rights to said pet, and will provide all veterinary records and all other information necessary in order to find a suitable home (medical records, any behavior problems, etc). I also understand that I will have no influence as to the adoption process.

Pets with severe medical or behavioral problems who cannot be successfully rehabilitated and/or treated will be evaluated by a veterinarian and/or behavioral consultant. If found necessary by the veterinarian and/or behavioral consultant, The Biscuit Foundation reserves the right to have the pet humanely euthanized.

Please fill out the following information completely and truthfully to the best of your knowledge. Any false information resulting in personal or property damage can result in a liability on your part.

General Information

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Evening Phone: _____ Cell Phone: _____

E-mail: _____

Pet's Name: _____ Age/BD: _____ Weight: _____ Gender: _____

Spayed/Neutered? Yes No At what age: _____ Where: _____

Breed(s): _____ Color/Markings: _____



1. Current Veterinarian: _____ Phone: _____

2. Date of last vaccination:
Rabies: _____ Parvo/Distemper: _____ Bordatella: _____ Heart worm prevention: _____
Date of 1st visit to the vet: _____ For? _____

3. Does your pet have any old/new injuries or health issues? Yes No

If yes, please explain: _____

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4. Is your pet currently taking any medications or supplements? If yes, list: _____

5. Are you the first owner of this pet? Yes No

Please explain where and why you got this pet? _____

6. Number of people in your household: _____ Gender/Ages: _____

7. Does your pet get along with (tolerate) any of the following (circle all that apply):

Children under 10 yrs. Male dogs Female dogs Cats Livestock Birds Other small animals

8. Does your pet chase any of the following (circle all that apply):

Adults Children Skateboards Bicycles Cars Livestock Dogs Cats Other: _____

9. Has your pet ever growled at you or anyone? Yes No

Please explain circumstances: _____

10. Has your pet ever bitten anyone? Yes No

Who was bitten? (circle all that apply): You A child Adult friend Adult stranger

Please explain circumstances: _____

11. Is your pet possessive of food or toys? Yes No

If yes, how does he/she react? _____

Who provokes response? (circle all that apply):

Another dog Another cat A child A friend A stranger You

12. Has your pet ever been in a fight that caused injuries serious enough to send either of the animals to the vet? Yes No

If yes, please explain: _____

13. Where does your pet normally stay at night? (Be specific): _____

During the day? _____

How long is your pet alone during the day? _____

14. Is your pet house trained? Yes No

Crate trained? Yes No Leash trained? Yes No

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15. What kind of food does he/she eat? _____

16. Has your pet had any obedience training? Yes No

If yes, what commands does he/she know? _____

17. Does your pet? Jump/climb fences Bark a lot Dig for something to do Chew things

18. Describe your pet's personality: _____

19. Please explain in detail why you wish to surrender your pet to The Biscuit Foundation: _____

The Biscuit Foundation surrender fees

1. _____ Pets current on all vaccinations and spayed/neutered
2. _____ Pets current on all vaccinations, but not spayed/neutered
3. _____ Pets that have no vaccinations and not spayed/neutered

Release Conditions

I, the undersigned, understand that I am giving up all further rights to this pet and upon surrender, give up such rights as to disposition of said pet. It is also understood that I have provided ALL information as to the health and behavioral conditions of this pet and am providing FULL DISCLOSURE truthfully and honestly, and any false statements OR non-disclosure can result in personal liability if this pet causes personal or property injury. The Biscuit Foundation agrees to take custody of this pet for the sole purpose of finding an appropriate adoptive home with a qualified person(s) who can adequately provide necessary care and medical attention as needed and understand that any bills incurred with providing care prior to adoptions will be reimbursed by the adoption fee paid by the person(s) adopting said pet. I understand that The Biscuit Foundation will be receiving an adoption fee from the adopting party and I make no claim to any monies collected from such adoption fees.

Signed: _____ Date: _____

The Biscuit Foundation Member: _____ Title: _____