



PET PRO LIFE ADOPTION & PLACEMENT, INC.
 PO BOX 3653 WWW.PETPROLIFE.ORG
 HUNTINGTON BEACH, CA 92605 (714) 964-3593 FAX (714) 968-5388
OWNER RELEASE DOG INFORMATION FORM

Tag # _____
 Log# _____

TODAY'S DATE _____ DOG'S NAME _____

MALE FEMALE AGE/DOB _____ SPAYED/NEUTERED YES NO WEIGHT _____

BREED _____ DESCRIPTION _____

REASON FOR GIVING UP DOG _____

PET PRO LIFE USE ONLY		RV1 - RABIES - 1 YR	RV3 - RABIES - 3YR	/	D - DISTEMPER	A2 - ADENOVIRUS-HEPATIS	L - LEPTOSPIROSIS	P - PARAINFLUENZA	B - BORDATELLA	P - CANINEPARVOVIRUS	C - CORONAVIRUS	LY - LYME	G - GIARDIA	/	/
DATE	BY														
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DEWORMER _____ DATE ____/____/____ BY _____ DATE ____/____/____ BY _____

FLEA MED _____ DATE ____/____/____ BY _____ DATE ____/____/____ BY _____

HEALTH GOOD FAIR POOR

MICROCHIP YES NO ID NUMBER _____ MFG _____

PAST SURGERIES/HEALTH PROBLEMS _____

DATE OF LAST VETERINARY EXAM _____ VETERINARIAN NAME AND PHONE _____

MEDICATIONS _____

PERSONALITY/TEMPERAMENT (friendly, shy, cuddler, etc) _____

DOG IS ALLOWED INDOORS OUTDOORS GARAGE OTHER

DOG SLEEPS INDOORS OUTDOORS GARAGE OTHER

WHAT DO YOU FEED YOUR DOG? BRAND _____ TYPE _____ WET DRY

HOW MANY TIMES PER DAY? 1 2 3 FREE FEED HOW MUCH? _____

HOUSEBROKEN? YES NO CRATE ENERGY LEVEL 1 2 3 4 5 6 7 8 9 10

HAS DOG EVER BITTEN ANYONE? (IF YES, PLEASE EXPLAIN) _____

GOOD WITH CATS? YES NO UNKNOWN GOOD WITH CHILDREN UNDER 8? YES NO UNKNOWN

GOOD WITH DOGS? YES NO UNKNOWN GOOD WITH AGES 8 AND OLDER? YES NO UNKNOWN

HAS DOG EVER ACTED AGGRESSIVELY TOWARD PEOPLE? (IF YES, PLEASE EXPLAIN) _____



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OWNER RELEASE STATEMENT OF DISCLOSURE AND AGREEMENT

OWNER'S NAME _____	STREET _____
APT _____	CITY _____
HOME PHONE _____	CELLULAR _____
DRIVER'S LICENSE # _____	STATE _____
ST _____	ZIP _____
WORK _____	EXT _____
EXPIRATION DATE _____/_____/_____	

For weekend placement services:

1. I understand that Pet Pro Life Adoption & Placement, Inc. (PPL), does not have proper boarding facilities available for my animal and that I am obligated to provide same for my animal during the week and after 4:00 pm on Saturdays and Sundays;
2. Should I abandon said animal in direct violation of Penal Code §597(s), I will remain liable for any and all costs including, but not limited to, boarding, fostering and medical expenses up to and including such time as PPL can place said animal in a suitable permanent home;
3. I understand that I shall be responsible for reimbursing PPL for any and all costs it incurs due to omission of any material fact either known, or unknown, suspected or unsuspected or reasonably should have been known at the time of the occurring incident, including, but not limited to, age of animal, health status, behavior problems, disease and/or vaccinations;
4. I understand that PPL shall be responsible for the final decision on the permanent adoptive home for my animal, and that I may not utilize the adoption center or and PPL services to secure a home for my animal without the approval of PPL and the completion of a PPL adoption questionnaire and contract;
5. I have read and agree to the attached Adoption Show Rules.
6. Additionally, I understand that I may not attempt to reclaim said animal either from PPL or from the new adoptive owner after I have released said animal for adoption;

As evidenced by my signature hereunder, I agree to the above terms:

Date: _____ Signature _____
Owner

Date: _____ Signature _____
Authorized Pet Pro Life Representative

For permanent release of my animal:

1. I understand that I am permanently releasing my animal to Pet Pro Life for fostering and placement into a suitable home;
2. I understand that I am releasing all claims to my animal as of the date entered on this form;
3. I understand that I shall be responsible for reimbursing PPL for any and all costs it incurs due to omission of any material fact either known, or unknown, suspected or unsuspected or reasonably should have been known at the time of the occurring incident, including, but not limited to, age of animal, health status, behavior problems, disease and/or vaccinations;
4. Additionally, I understand that I may not attempt to reclaim said animal either from PPL or from the new adoptive owner after I have released said animal for adoption;

As evidenced by my signature hereunder, I agree to the above terms:

Date: _____ Signature _____
Owner

Date: _____ Signature _____
Authorized Pet Pro Life Representative