



# Animal Surrender Form

11878 PA 85, Kittanning, PA 16201 724-548-4520 | [www.orphansofthestorm-pa.org](http://www.orphansofthestorm-pa.org)  
Humane Police Officer O'Donnell, phone 724-954-9515, email [HumaneOfficerAC@gmail.com](mailto: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: \_\_\_\_\_