



THE PET RESCUE CENTER

Rescuing Pets, Creating Families, Saving Lives!

Application for Relinquishment of Pet

Owner Name: _____ Date: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Alternate Phone: _____

Email: _____

Name of Pet: _____ Dog Cat Male Female

Neutered or Spayed? Yes No

Distinguishing Marks: _____

Reason for Relinquishment? _____

Has your pet to a veterinarian in the past 6 months? Yes No

Are you currently an active client of a veterinarian? _____

If so, who? _____ Location: _____ Phone: _____

Any known medical issues for your pet? _____

The Pet Rescue Center charges a relinquishment fee of \$300.00 per pet. By signing below, you agree that if we accept your pet for relinquishment, you are aware, and willing to pay the relinquishment fee and any other fee represented in the relinquishment terms and conditions.

Signature of Owner: _____ Date: _____