



# BEAGLE RESCUE

## SURRENDER FORM

Owner(s) name : \_\_\_\_\_ Today's Date: \_\_\_\_\_

No & Street name: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ P/code: \_\_\_\_\_

Tel: (home) \_\_\_\_\_ (work) \_\_\_\_\_ (mobile) \_\_\_\_\_

Email (please print): \_\_\_\_\_

I unconditionally surrender the beagle described below to **BEAGLE RESCUE NSW** and certify that the information provided herein is true to the best of my knowledge:

Beagle's full name \_\_\_\_\_ Sex M / F

Colour \_\_\_\_\_ Age \_\_\_\_\_ Weight \_\_\_\_\_

Spayed or neutered Yes / No (circle) Microchipped Yes / No *\*\* See note at the end*

Heartworm Treated Yes / No Wormed Yes / No Flea treated: Yes / No

Please provide accurate dates for the latest vaccinations: \_\_\_\_\_

Do you have the vaccinations records? Yes / No (circle)

If NO, name of vet/clinic where vaccines given \_\_\_\_\_

Is your beagle in good health? Yes / No If No, what is the problem/s? \_\_\_\_\_

Does your beagle have any temperament problems? Yes / No

If Yes, what is the problem/s? \_\_\_\_\_

Information that will help us place your pet: (tick all that apply)

Well behaved?  Yes  No

Good with other dogs?  Yes  No

Good with cats?  Yes  No

Good with children?  Yes  No

Lead Trained?  Yes  No

Housetrained?  Yes  No

Had Basic Obedience Training?  Yes  No

**Was the beagle allowed inside?** Yes / No **Does the beagle sleep Inside or outside?** \_\_\_\_\_

**Other important things that we should know that will help us place him/her in the most suitable home:**

---

---

---

**Reason(s) for surrendering your beagle:**

---

---

---

I certify that I am the owner of the beagle described herein. I understand that there are no written or verbal guarantees given or implied regarding the placement of this beagle other than **BEAGLE RESCUE NSW** best efforts to find a good home for the pet. I promise to provide vaccination records as indicated above as well as any other pertinent medical information.

To the best of my knowledge, the above-described beagle has not bitten anyone during the last ten (10) days.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**\*\* Please note: You MUST also provide and sign the NSW Companion Animals Act Change of Owner/Details form (C3A) as the Old Owner. (Specifically Items 9 and 10 on that form)**