

**Mid-Atlantic Poodle Rescue
Owner's Release Form**

I, _____ hereby transfer and relinquish
(Name of Owner)

all interest in _____ . Upon execution of this
(Name of Dog)

document, the above named dog becomes the sole property of Mid-Atlantic Poodle Rescue and it is understood that I will have no further rights, title or interest in this dog.

Name of Dog: _____

Age: _____ Color: _____

Sex: _____ Spayed/Neutered? _____

Registration Number (if available) _____

Health Records (if available) _____

Date of last vaccinations (if known) DHLPP _____ Rabies _____

Medications? _____

On heartworm preventative? _____ Date of last dose _____

Please answer the following questions to the best of your ability:

- 1) Has the dog bitten anyone within the last 10 days? Yes / No
- 2) Has the dog ever bitten anyone? Yes / no
- 3) If yes, please explain _____

Owner's Name: _____

Address: _____

Phone: _____

Donation: _____

Signature: _____ Date: _____

Mid-Atlantic Poodle Rescue Representative: _____