



7145 Johnson Road
Daphne, AL 36526
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DATE RECEIVED: _____

ANIMAL SURRENDER

REASON FOR SURRENDER: _____

NUMBER OF DOGS: _____

NUMBER OF PUPPIES: _____

NUMBER OF CATS: _____

NUMBER OF KITTENS: _____

DESCRIPTION (Breed, Age, Color, Name): _____

Office Use

STATEMENT OF SURRENDER

I CERTIFY THAT (I DO ___ I DO NOT ___) OWN THE ANIMAL DESCRIBED ABOVE. I HEREBY SURRENDER ALL MY INTEREST TO THE DAPHNE ANIMAL SHELTER. THE ANIMAL SHELTER AND ITS OFFICERS AND EMPLOYEES MAY DISPOSE OF THE ANIMAL AS SEEN FIT AND ACCORDING TO THE LAW. I KNOW THAT I AM UNDER NO OBLIGATION TO PAY ANY FEES. I CERTIFY THAT THE ANIMAL HAS NOT BITTEN ANYONE WITHIN THE PAST TEN DAYS.

SIGNATURE: _____

(PRINT) NAME: _____

ADDRESS: _____

PHONE NUMBER: _____
