

## Maltese Rescue California (MRC)

## Release of Ownership Agreement/Dog Personality Profile

www.malteserescuecalifornia.org

l,		am the legal owner of the Dog	in this	
docum	nent. I currently reside at _			
City, St	tate, Zip	Phone:		
Email:		Date:		
1.		rrender my Male Female Maltese dog know as(MRC) for placement in a new home.	_ to the	
2.	I certify that I am the own	er of this dog, free and clear of all other interests, until this surrender is	signed.	
3.	I certify that this dog is not possessed of any dangerous or vicious propensities and has never bitten or attempted to bite any person or animal, and that the dog is not ill. I further certify that I have not willfully concealed information about the dog that might indicate any vicious propensities or illnesses.			
4.	I hereby forever release, discharge and agree to hold harmless and indemnify Maltese Rescue California, its Board of Directors, its officers, members, agents and volunteers from all claims, demands, actions, causes of action, and liability of any kind whatsoever arising as a result of or in connection with the surrender and subsequent adoption or other disposition of this surrendered dog. I understand that I give up all rights and ownership to the dog and this is a legally binding contract and cannot be rescinded.			
5.	I hereby give permission fo	or my veterinarian/cliniclocated at:		
	all vet records of this dog	Telephone:to the Maltese Rescue California.	to release	
	read the above and underst I aforementioned.	and that by executing this document, I hereby surrender all rights and clo	ims to the	
Owner's Signature		Date:		
Witnes	ss Name	Witness Signature		

MY DONATION TO HELP DEFRAY THE COST OF THIS RESCUE EFFORT IS: \$\_\_\_\_\_ **Checks Payable to Maltese Rescue California** 



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Dog Personality Profile:
Dog's Name, Age, Sex and Weight:
This dog is Spayed 🔲 not Spayed 🔲 If not spayed; date of last heat cycle:
How long has the dog lived with you? Where did you get the dog?
Why are you giving up the dog?
Does the dog have a microchip?  Yes  No  Not Sure
If Yes; Micochip manufacture and number
This dog is current on vaccinations?  Yes  No  Not Sure
Date of last DHPP Date of last Rabies Date of last Heartworm test
Does your dog have any special problems/medical conditions or is on any medications?   Yes  No
If Yes; explain
May we (MRC) contact his/her vet?  Yes No
Vet/Clinic name Phone Number
Will your vet/clinic provide shot records?  Yes No
Dog's Lifestyle:
Is this dog completely housetrained?  Yes  No  Pad Trained  Goes outside.
Where is this dog kept during the day?
How many hours is this dog typically left alone per day?
Does this dog have a history of destructive habits? Yes No, Explain if Yes:
When and how often did it occur?
Does this dog have history of escaping? Yes No, Explain if Yes:
How much exercise is this dog accustom to?
Is this dog accustomed to car rides? Frequently Sometimes Never Long Rides Short Rides
Is this dog accustomed to being kenneled? Yes No; Night only Day only
Has this dog ever attended obedience classes? Yes No
How would you describe this dog most of the time? Very active Friendly/Playful Calm
Couch potato Rambunctious Vocal/Barks/Howler Tolerant Shy Fearful of small children
Play bites/Chew things Cases small animals Food/Toy aggressive
What are some things you truly love about this dog/greatest traits?
What toys or activities does this dog enjoy?
Is this dog used to living with other animals? Yes No
Does dog have any fears or phobias?
Has this dog been around children? Yes No
How does this dog act with children?  Friendly  Nervous  Jumps on  Avoids  Plays
Has this dog ever done the following to an adult? Growled Snapped Bitten None of these
If yes, what were the circumstances?
•
Owner's Signature:
I certify that this is my signature and that all information is accurate and true