

ANIMAL INTAKE FORM

Animal Shelter / Facility Name:

Intake Number:

Owner / Previous Custodian Information:

Full Name:

Government ID / Driver License No.:

Address:

Phone / Email:

Animal Information:

Animal Name / ID:

Species:

Breed:

Sex (M/F/Neutered/Spayed):

Age / Approximate Age:

Color / Markings:

Medical & Health Information:

Vaccinations (list all):

Current Medications:

Known Medical Conditions:

Behavioral Notes / Temperament:

Intake Details:

Date of Intake:

Time of Intake:

Intake Condition:

Intake Method (Owner Surrender, Stray, Transfer, etc.):

Legal Release and Agreements:

I hereby certify that I am the lawful owner or custodian of the animal described above, or have the legal authority to surrender custody. I release all claims and rights to the above animal and understand that the shelter/facility shall assume ownership and responsibility upon intake. I understand that the animal may be adopted, euthanized, or otherwise disposed of according to applicable laws and shelter policies. I acknowledge that no warranties or guarantees are made regarding the animal's health, behavior, or future condition. I agree to indemnify and hold harmless the shelter/facility, its agents, employees, and volunteers from any claims arising from the intake and disposition of this animal.

OWNER / CUSTODIAN SIGNATURE

SHELTER REPRESENTATIVE SIGNATURE

Signature: _____

Signature: _____

Printed Name: _____

Printed Name: _____

Date: _____

Date: _____

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