

Name (Animal Control or Animal Shelter)  
Address  
City, State, Zip  
Telephone  
AW License ID#

### Disclosures

Date Received: \_\_\_\_\_ Owner Relinquish or Impoundment: \_\_\_\_\_  
Cage/Kennel Number: \_\_\_\_\_ Breed: \_\_\_\_\_ Estimated Age: \_\_\_\_\_ Color: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Sex: M F NM SF Spay/Neuter Date: \_\_\_\_\_  
Adoption Fee: \$ \_\_\_\_\_ Additional Fees: \$ \_\_\_\_\_ \$ \_\_\_\_\_ Microchip #: \_\_\_\_\_  
This animal was returned by an adopter on \_\_\_\_\_ for the following reason: \_\_\_\_\_

Inoculations and treatments of this animal since the date received:

<u>Vaccinations/Inoculations</u>			<u>Diagnostic Tests</u>		
	Product	Date		Date	Results
<input type="checkbox"/> Rabies	_____	_____	<input type="checkbox"/> Fecal	_____	_____
<input type="checkbox"/> K-9 Distemper/Parvo	_____	_____	<input type="checkbox"/> Parvo	_____	_____
<input type="checkbox"/> FVRCP	_____	_____	<input type="checkbox"/> Heartworm	_____	_____
<input type="checkbox"/> FELV	_____	_____	<input type="checkbox"/> FELV/FIV	_____	_____
<input type="checkbox"/> Bordetella	_____	_____	<input type="checkbox"/> Other	_____	_____
<input type="checkbox"/> Other	_____	_____			

<u>Dewormers/Medications</u>	<u>Dosage</u>	<u>Date</u>	<u>Date</u>	<u>Date</u>	<u>Date</u>	<u>Date</u>	<u>Date</u>	<u>Date</u>	<u>Date</u>

Additional information may be included on a separate sheet.

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A copy of our policy regarding warranties, refunds, or returns is available upon request. The Provisions of Adoption are non-transferable.

### Acknowledgement of Disclosures

I hereby attest that all of the above information is true and correct to the best of my knowledge.

(Shelter/AC) Staff: \_\_\_\_\_  
Print Name Signature Date

I hereby attest that this disclosure was posted on or near the cage of the dog or cat for adoption and that I have read all the disclosures. I further understand that I am entitled to keep a signed copy of this disclosure.

Adopter: \_\_\_\_\_  
Print Name Signature Date

Original: Animal Shelter/Animal Control Copy: Adopter