

CITY OF MCLEANSBORO
Animal Control
Animal Surrender Form

By signing this form, I state that I am the owner of the animal(s) who is/are subject of this Animal Surrender Form, hereinafter referred to as "the animal." To my knowledge, no other person has any right to this animal. **I hereby surrender all rights to the animal to the City of McLeansboro. I understand that once I relinquish the animal, the animal will not be available to be returned.** I have read and understand the terms of this Animal Surrender Form.

OWNER INFORMATION:

DATE

ADDRESS

PRINTED NAME

SIGNATURE

ANIMAL INFORMATION:

Name: _____ Type: _____

Tag Number: _____ Breed: _____

Sex: _____ Weight/Size: _____

Spay/Neuter: _____ Color: _____

Current Vet/Last Visit: _____

General Condition of Animal:

Continued on Back

Reason(s) for Surrender:

Special Considerations (e.g. indoor vs.outdoor animal):

RECEIVING OFFICER