CASA ID #:	

Staff Initials

Date:	

Camano Animal Shelter Association 198 Can Ku Road Camano Island, WA 98282 CamanoAnimalShelter.org casa@camanoanimalshelter.org 360.387.1902

DOG SURRENDER

0-	Dog's Name:		1	OOB:		Age:	yrs,	mo,wk	
ANIMAL INFO	Primary Breed: Secondary: Color: Description:				_	Sex:	Male F	emale	
					_	Altered: Yes No			
A	Size: Small Medium La	arge Weight:	lbs,	oz.	M	icrochipped:	Yes N	o scanned by:	
		,	Surrenderii	ng Owner Info	ormation				
Ow	ner Name:								
Add	lress:			City:		State	:	Zip:	
Primary Phone: Se			condary Phone:			Email:			
	son for Surrendering: (check								
	Job ChangeFinancial er Reasons:		_	_		· ·	ining Issu	esCannot Conta	
	mal's Veterinarian: (name, c								
_	I give CASA permission to a		_						
	Standard Surrender	Fee: \$25	Additi	onal Suggeste	ed Donati	on for out-	of-area	residents: \$50	
o	ther Contribution:	\$15 \$20	\$25	\$30 \$50	\$75	Other: \$_		_ Thank You!	
M	onetary donations go towo	ard expenses si	ıch as food, l	ab fees, vet vis	its, vaccina	utions, etc.			
Anii CAS	s is to certify that I am the smal Shelter Association (CSA, including its officers, eaid animal. To the best of	ASA) to make mployees and	disposition o	f the animal as vill not incur an	they deem y obligation	n necessary. ns to be acco	It is expi untable f	ressly agreed that or such disposition	
Ow	ner Signature:						Date: _		
Co-	Owner Signature:						Date: _		