



LSPCA ANIMAL SURRENDER AGREEMENT

I, _____, an adult 18 years or more, do voluntarily give, donate, surrender and release to _____ of Lancaster SPCA (LSPCA), the following animal{s} hereinafter referred to as ANIMAL{s}

Animal's Name: _____ Male ___ Female ___ Color{s} _____

Age: _____ Canine _____ Feline _____ Breed _____

I represent and warrant that I am the lawful owner of the ANIMAL{s} and I have full power and authority to surrender the ANIMAL{s} to LSPCA. No other person has any legal or equitable ownership interest in the animal.

I have disclosed ALL material information regarding the medical and behavioral history of the animal{s}. I willfully surrender all medical records and information pertaining to the animal(s) named herein and Lancaster SPCA has my permission to contact my veterinarian for any necessary information pertaining to the animal{s} and I consent to the release of any and all medical information by any medical provider.

Veterinarian's Name _____

Phone Number _____

ADDRESS: _____

I further acknowledge that I am releasing the animal{s} completely voluntarily and that no considerations or promises of any kind have been made to me by anyone.

Please list any particular concerns LSPCA should know about the animal's health, behavior, personality or history (use back of sheet if needed).

I understand that by releasing the animal{s}, I relinquish ALL ownership or other interest in the animal{s}. I will seek no further information about the animal{s} and will not press for details. My contact with the animal{s} terminates at the time of surrender and LSPCA is under no obligation to follow up with information regarding same.

I hereby release and FOREVER discharge any and all rights, liabilities, claims, obligations and causes of action arising out of or relating to ownership, possession or disposition and I agree to hold harmless LSPCA from and against any and all such rights, claims liabilities, obligations and causes of action which may be asserted by third parties.

THIS IS A LEGALLY BINDING DOCUMENT FOR THE IRREVOCABLE SURRENDER OF YOUR ANIMAL{s} to LSPCA.

I have fully read and understand this SURRENDER AGREEMENT and I accept and agree to abide by its terms.

Date: _____

Person Surrendering _____

Address: _____

Phone _____

Email _____

WITNESS Name _____

WITNESS Signature _____

Both parties must sign and date each copy with one copy being retained by the person surrendering the animal{s} and another by the person it is being surrendered to.

Signature _____ Date: _____

LSPCA Rep Signature _____ Date: _____