

LABRADOR WELFARE - RELINQUISHING CONTRACT Registered Charity No 1012192

Owner:									
Address:									
Post code:									
Telephone: Home:					Mobile:				
Name of do	g:					Microchip No			
lo sonsidor	_					are and the Own			Lagranda
			_	_		ship and possess re to cover their		_	_
	The i	followina	terms	and condition	ns sha	ll apply to this	s aareei	ment.	
1. Owne	-	one wing	cerms		,,,,,	m appry to time	, agree.		
a.									
b.	b. I understand that from the date of this agreement, ownership of the dog will vest in and remain at all							n at all	
	times thereafter with Labrador Welfare;								nd wholly
С.	c. I understand that the rehoming of the dog will be the sole responsibility of Labrador Welfare and wholly within their discretion.								
d.									
	Welfare and that, once done, such is permanent and not reversible.								
e.		lerstand that when this agreement has been completed, I will have no remaining rights to the dog, that this agreement cannot be cancelled.							
	and that this agreement cannot be cancelled.								
2. My R	esponsibilitie	S							
a.	I have completed the questionnaire on this form accurately to the very best of my knowledge. I confirm								I confirm
L	that the answers I have given are true and honest.								
D.	 I confirm and declare that, to the best of my knowledge, the dog has no aggressive or vicious tendencies that would pose a risk to any person(s) or animal(s) and is safe to be rehomed. 								
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				Questi	<u>onnair</u>	<u>e</u>			
		Ple	ease aı	nswer the fol	lowing	questions full	У		
Age of dog:	year	smo	nths	Sex:	Male	/ Female	Colour		
Neutered?	Yes / No	Date las	t vaccin	ated:			Vac ca	ard available?	Yes / No
Micro chippe	ed: Y	es / No		House trained	1?	Yes / No	Used	d to kennels?	Yes / No
Labrador / Labrador Cross With papers / Without papers									
If Labrador	Cross, state o	other colour	rings: (e	e.g white flash o	on chest,	/ white on paws e	etc)		

Relevant Dates:							
Last season?	/ Not applicable						
Last worming?	JBrand used?						
Last flea treatment	J Brand used?						
Current diet – brand name?							
Time of feeds?							
Is the dog all right with other dogs?	Yes / No / Don't know Has the dog lived with other dogs? Yes / No / Don't know						
Is the dog all right with cats?	Yes / No / Don't know						
Is the dog used to children?	Yes / No / Don't know Age range?						
Is the dog destructive?	Yes / No / Don't know						
Has the dog met livestock?	Yes / No / Don't know						
If so, how did it react?							
What cues does the dog respond to?	responds to name/ sit / stay / down / leave / comes when called /waits for food						
Does dog walk on?	Collar / head collar / harness and lead						
Dog walks	To heel / pulls on lead / never walked on lead						
Does dog travel well?							
Last Vet's name and address							
Existing and previous medical	conditions (use separate sheet if necessary)						
Reasons for relinquishing dog:							
I agree and confirm that true facts have been provided about the dog and I have not withheld information that could put any person(s) or animal(s) at risk when placed into the care of Labrador Welfare and/or whe rehomed. I also agree to give Labrador Welfare permission to change the microchip into a new owner's na							
This is a legally binding agreen Labrador Welfare and are the	ent. Sign it only if you are prepared to give up ownership of your dog to egal owner of the dog						
Signed	Dated						

Labrador Welfare Rehoming Co-ordinator

7 Meadow Road, Scunthorpe, North Lincolnshire DN17 1RS Email: adoption@labradorwelfare.org