Pet Shelter Registration and Agreement

I, the animal owner signed below, request the emergency housing of the animal being evacuated because of a pending or occurring disaster. **I must be housed at this shelter during my pets stay.** The animal owner hereby releases the person or entity who is receiving the animal from any and all liability regarding the care and housing of the animal during and following this emergency. The animal owner acknowledges that if emergency conditions pose a threat to the safety of the animal, additional relocation may be necessary, and this release is intended to extend to such relocation.

The animal owner acknowledges that the risk of injury or death to the animal during an emergency cannot be eliminated and agree to be responsible for any veterinary expenses which may be incurred in the treatment of their animal.

The Shelter reserves the right to refuse aggressive or ill animals.

The Shelter is not responsible for lost or ruined items.

Check out is required when departing from the shelter.

ANIMAL OWNER INFORMATION		
Animal Owner Signature:	Date:	
Animal Owner Name(s):		
Address:		
City:	State:	Zip Code:
Phone #:	Emergency Phone #:	
Do you have your phone available now?	Email:	
Emergency Contact Name (not in shelter):	Phone:	
Emergency Contact Person* in Shelter:	Phone:	

This person will be responsible for providing pet care in your absence.

ANIMAL INFORMATION			
Name:		Color / Identifying Marks:	
Breed:	Sex:	Spayed / Neutered?	Age:
Is this animal on any medication of on a medically-prescribed diet? *Pets will be fed provided GI food unlesss otherwise medically prescribed.*		❑ Yes ❑ No	
If yes, list all medications and directions for administering:			
Vaccine records provided: ❑ Yes ❑ No		Pet will be vaccinated at shelter: ❑ Yes ❑ No	
List any belongings this pet came in with other than medications (food, leash, toy, etc.):			
Is there any other information you would like to share about your pet:			
CHECK OUT: *Signature below indicates that the owner or guardian has received their pet and belongings and is checking out of the shelter.*			
Owner Signature:			
Date and Time Checked Out:			
Staff Name:		Date / Time:	