

Agreement to Transfer Pet Ownership

Name

Address

Phone

I acknowledge that I am transferring ownership of the pet(s) described below:

Name(s) of New Owner- _____

Name of Pet _____ Approximate Age _____

Breed _____ Color _____ Weight _____

Microchip/Tattoo ID Number _____

Dog _____ Cat _____

Male _____ Female _____ Neutered Male _____ Spayed Female _____

Vaccination History _____

De-worming History _____

I understand that (please initial each statement):

___ I am transferring ownership of my pet to the person above, where he/she will be treated at no further charge to me.

___ If my pet is adopted, he/she will be adopted as a pet and companion animal only, and will not be used for any other purpose.

___ This veterinary practice must and will maintain strict confidentiality with respect to the identity of the adoptive owner and I will not have access to that information.

___ Once ownership has been transferred, I will no longer receive any reports as to the condition or status of this pet.

___ I am financially responsible for this fees related to this pet's medical care up until the transfer of ownership to new owner.

Signature of transferring Owner

Date