



Surrender Agreement

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I, _____ an adult, do hereby voluntarily and irrevocably give, donate, surrender and release to Bella's Promise Pet Rescue, hereinafter referred to as BPPR, the following animal(s), hereinafter referred to collectively as "Animal(s)".

Animals(s) Name(s): _____ Male _____ Female _____

Color(s): _____ Age(s): _____

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 BPPR. No other person has any legal or equitable ownership interest in the Animal(s).

I have disclosed to BPPR 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). BPPR has my permission to contact my veterinarian for any necessary information pertaining to my Animal(s), and I hereby consent to the release of any and all medical information by any medical provider.

Veterinarian: _____ Address: _____ Phone: _____

I further acknowledge that I am releasing the Animal(s) completely voluntarily and that no representations, considerations or promises of any kind have been made to me by BPPR or any of its representatives.

I understand that by releasing the Animal(s) to BPPR, I relinquish all ownership or other interest in the Animal(s). BPPR is under no obligation whatsoever to follow up with information about the Animal(s).

I hereby release and forever discharge BPPR from any and all rights, claims, obligations, liabilities, and causes of action whatsoever arising out of or relating to the ownership, possession, or disposition of the Animal(s), and I agree to indemnify and hold harmless BPPR from and against any and all such rights, claims, obligations, liabilities, and causes of action which may be asserted by third parties.

This is a legally binding document for the irrevocable surrender of the Animal(s) to BPPR.

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

Owner's Name: _____ Donation Amount: _____

Owner's Address: _____

Phone: (Home) _____ (Work) _____ Email: _____

Owner Signature: _____ Date: _____

BPPR Coordinator Signature: _____ Date: _____