

HELP US HELP YOUR GOLDEN



Golden Retrievals
RESCUE • ADOPT • LOVE

Intake Profile

Dog's name: _____ Neutered/spayed Sex _____ Date of birth (if known) _____ Age _____

Description of dog (color, weight) _____

Distinguishing marks _____

Is the dog a purebred Golden Retriever? Yes No Uncertain (If Golden Retrievals concludes, during or after our initial meeting, that the dog is mixed breed, you must agree to accept its return to you.) Initial here _____

Why do you want to give up this dog? _____

How long have you owned this dog? _____ Housebroken? Yes No Ever been bred? Yes No

Has this dog ever attacked an adult person or child? Yes No Ever snapped at an adult person or child? Yes No

If yes, explain the circumstances _____

Good with children? Yes No Other dogs? Yes No Cats? Yes No Other animals? Yes No

If no, please explain _____

Ages of children at home _____ Amount of time dog is with children _____

Has this dog ever bitten, attacked or snapped at another dog or cat? Explain _____

Does your dog...	Yes	No	Sometimes	Don't know	Does your dog...	Yes	No	Sometimes	Don't know
Like to ride in cars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Get along with other dogs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Like to swim	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Get along with adults?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Like to run away	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prefer one gender of human over the other?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jump fences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If yes, which one?	<input type="checkbox"/> male		<input type="checkbox"/> female	
Dig	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bark or whine when left alone?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chew non-dog items	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Like to be petted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have obedience training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Jump up to greet people?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Where, when _____					Try to "mount" other dogs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Let you grab him	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Come when you call?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Let you touch him anywhere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Like to play tug of war?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Let you take toys and food away	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Growl or bark at strangers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If not, explain _____					Hide behind you when meeting strangers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Show any signs of possessiveness toward food or toys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bite at leash when attached?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Get excited by moving objects, such as kids on bikes, squirrels, cars?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Guard territory?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stalk or pounce on other animals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Go "belly up" when meeting new dogs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bark when excited?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Urinate when excited or nervous?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Like to carry things in his mouth?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Play "keep away" when off leash?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Like to rip up soft toys?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

To help us place the dog in the best family for him/her, please answer the following questions regarding your dog's medical history and personality.

Date of: DHLPP shots? _____ Corona shots? _____ Rabies shot? _____ Tag expire? _____ Lyme shots? _____ Fecal test? _____

Are AKC papers and/or pedigree available? Yes No

Does the dog have a current Bordetella inoculation (for kennel cough)? Yes No When? _____ Date of last heartworm test? _____

Was the last heartworm test an occult test? Yes No When did you give the last heartworm pill and what brand was the pill? _____

Has the dog ever been treated for ear infections, flea bites, allergy, hot spots, sores or seizures? _____

Does the dog have epilepsy, VWD, hypothyroidism, hip dysplasia, arthritis or any other medical condition? _____

Has the dog ever been treated for behavior problems? Yes No If yes, please explain _____

Commands the dog knows, such as: heel stay sit down come fetch others _____

Brand of dog food fed _____ Amount _____ How many times per day? _____ What times of the day? _____ Table scraps? Yes No

How often groomed? _____ Does the dog like grooming? Yes No By owner or groomer? _____

Where does the dog sleep? _____ Live during the day (run of house, blocked off, crate)? _____

Is the dog accustomed to being: Walked Tied out Crated Running loose Allowed on furniture? Yes No

Is the dog crate trained? Yes No If you now use the crate, how long do you usually crate the dog each day? _____

Does the dog like to grab your arm or clothes? Yes No What does the dog dislike? _____

What does the dog like? _____ What is the dog afraid of? _____

What are the dog's bad points? _____ What are the dog's good points? _____

Is the dog afraid of thunderstorms? Yes No If yes, what does the dog do? _____
 Will the dog willingly roll over? Yes No Will the dog willingly allow you to look at his/her belly? Yes No Is the dog afraid of fireworks? Yes No
 Will the dog allow you to touch: Eyes? Ears? Examine mouth? Examine feet? Trim nails? Touch tail?
 Is the dog familiar with being outside in a yard alone? Yes No Does the dog live outside in a dog house or kennel? Yes No
 Is the dog tattooed or microchipped? Yes No If yes, what are the registration numbers? _____
 Please list any other information helpful to the dog's new owners. Tell us as much as you can about this dog, such as the words and commands the dog responds to, etc.

If the dog does something wrong, how do you discipline or punish him/her (has the dog ever been hit)?

TERMS AND CONDITIONS

MUST BE READ AND SIGNED BY THE OWNER(S) RELINQUISHING THE ABOVE-NAMED DOG

I/we certify that I/we are the legal owners(s) or the duly appointed agent(s) or guardian(s) of the above-described dog, and I/we hereby affirm, acknowledge, warrant and represent that ALL information contained in this agreement is true and correct to my/our best knowledge and belief. I/we certify that to the best of our knowledge, the above-mentioned dog is a purebred Golden Retriever. I/we further agree to accept the dog's return if, at its discretion, Golden Retrievals concludes that the dog is a Golden mix or is aggressive. Should any of the information set forth in this agreement be discovered to be false, untrue or misleading in any respect at any time, Golden Retrievals has the right to:

1. Rescind this Agreement and require owner to take the dog immediately into his/her/their possession, and/or
2. Require owner to pay all costs incurred in the care, keeping, placement or disposition of the dog.

Because actual damages may be difficult to determine without protracted litigation, the relinquishing owner shall pay Golden Retrievals the sum of \$5,000 in liquidated damages if an undisclosed defect which should have been disclosed to Golden Retrievals is discovered by an adoptive owner or Golden Retrievals after ownership of the dog was relinquished to Golden Retrievals.

Further, should any of the information set forth in this agreement be discovered to be false, untrue or misleading in any respect at any time, then, in addition to the above remedies, owner agrees to indemnify and hold harmless Golden Retrievals by, from and against any and all claims, suits, damages, liabilities and costs (including reasonable attorney's fees) related to or in any manner connected with the dog.

I/we give Golden Retrievals the right to access to any and all previous medical records regarding this dog and authorize prior veterinarians to release all records to Golden Retrievals.

I/we attest that the information listed is true and correct and we release and indemnify Golden Retrievals from any responsibility for any false information provided by me/us regarding the above-listed dog. I/we are signing and relinquishing said dog of my/our own free will and not under duress of any kind, and acknowledge the surrendering of legal ownership and any and all future claims.

The undersigned legal owner/guardian of this dog understands and accepts Golden Retrievals as the new owner of the above-named dog. As such, Golden Retrievals shall reserve the right to surgically sterilize and acquire any other medical or surgical care deemed appropriate by Golden Retrievals for the dog. IN CASE OF AGGRESSION OR EXTENSIVE MEDICAL OR SURGICAL PROBLEMS (as determined by Golden Retrievals in conjunction with veterinary consultation), Golden Retrievals reserves the right to euthanize the dog if it is deemed appropriate.

The undersigned also agrees to hold Golden Retrievals harmless from ANY claims made after the dog is relinquished to Golden Retrievals, including the right to reclaim the dog. I/we have read the Terms and Conditions, and understand the Terms and Conditions, and am signing this under my/our free will.

IF DOG IS CO-OWNED (HUSBAND/WIFE OR TWO PEOPLE), BOTH SIGNATURES ARE REQUIRED BEFORE DOG CAN BE ACCEPTED BY GOLDEN RETRIEVALS.

We are all volunteers who work full-time jobs. Once all arrangements to admit the dog into the program are complete, it is essential to relinquish the dog along with the attached medical records from all veterinarians who have examined and/or treated the dog. In the event you decide NOT to relinquish the dog, please call us immediately so we can turn to other dogs that are waiting to enter the system.

Owner signature	Date	Co-owner signature	Date
Owner(s) name: _____		Phone: _____	
Address: _____		City: _____	State: _____ ZIP _____
Name and address of veterinarian:			
Name: _____		Phone: _____	
Address: _____		City: _____	State: _____ ZIP _____

