

OWNERS & PETS IN EMERGENCY/DISASTER SITUATIONS

Owner Name: _____

Address: _____

Phone: _____ Email: _____

Pet Name: _____	Species: _____	
Breed: _____	Colors: _____	Age: _____
Sex: _____	Spayed/Neutered: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	

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Emergency Situation: _____

Estimated length of time animal(s) will be at shelter: _____

Does your pet(s) need medication, supplements, or a special diet? Yes No
If yes, please list: _____

Has your pet(s) ever bitten anyone? Yes No
If yes, please explain in detail: _____

If yes, was the bite recorded and if so, where to? _____

Is your pet(s) afraid of anything in particular? Yes No

If yes, please select what this pet(s) is afraid of.

Thunder Loud noises Being alone Riding in a car Cars on the Street
Men Women Children Strangers Other: _____

Additional information we should know about this pet(s): _____

I hereby release the above pet(s) into the custody of Noah's Ark Animal Welfare Association (NAAWA) until I am able to resolve this emergency situation. I declare that this pet(s) is legally mine and I agree to hold NAAWA employees and volunteers exempt from liability or blame. I understand that I will be providing the food for my animal(s) during their stay at NAAWA and if I am unable to provide it NAAWA will charge me \$5.00 a day per animal for food.

Owner Signature _____ Date _____

NAAWA Staff Initials _____