PACIFIC PUG RESCUE

RELEASE AGREEMENT

Pug		REEMENT is made and enteronafter referred to as PPR) and			
shelt	ers, humane so	r to protect the PUG breed PPI ocieties, and other persons and ed, lost or mistreated; and,			
		pes accept such dogs into the remined in each case; but is not			
NOV	V, THEREFORE	E, it is agreed as follows:			
1.	PPR does agr	ee to accept into the Rescue P	Program the fo	ollowing described	d dog:
	BREED:	NAME: _			
	SEX:	_ NEUTERED/SPAYED?:	F	RABIES TAG #: _	
	TATTOC	#:	AK	C #:	
	MICROCH	IP #:	APPI	ROX AGE OR D.O	O.B.:
	COLOR:	ORIGIN (OF DOG:		
2.	It is expressly understood by the parties to this Release Agreement that Releaser voluntarily releases the above named dog to PPR free and clear of any claim of ownership, and guarantees the no claim of ownership will ever be made against said dog.				
3.	Releaser represents and warrants that Releaser is the sole owner of this dog and has the full and complete legal right to release said dog to PPR.				
4.	Releaser provides information regarding the temperament, behavior characteristics and any medical problems and treatments of the dog being released on the "Dog Profile by Current Owner" section which shall be made part of this Release Agreement.				
5.	Releaser furth	Releaser further warrants that this dog has never bitten anyone.			
6.	PPR agrees to hold Releaser harmless for any actions of the dog after it is released to PPR unless there is an undisclosed history of aggressive episodes involving biting.				
7.	In the case of above, the Releaser shall be solely and completely responsible for the actions of the dog.				
8.	This Agreeme	nt shall be governed by the lav	vs of the State	e of Washington a	and the State of Oregon.
DAT	ED effective as	of the date set forth in the first	paragraph of	page one.	
SIGI	NED Releaser :		F	Releaser Phone:	
	Address: _				
	_				
Initia	als of PPR repr	esentative		Initials	of Releaser

Name and Address of Dog's Veterinarian:	
Veterinarian's Telephone:	
	PPR Phone: (503) 704-3587
PPR Representative Signature	
PPR Representative Name (Please Print):	15532 SW Pacific Highway C1B, #134 Tigard, OR 97224

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<u>DOG PROFILE BY CURRENT OWNER:</u>
(Please list any medical conditions and their treatment, behavioral issues, personality quirks, tricks, training, etc that it would be valuable to know about your pet below. Please be as detailed as possible):