

Old LEASH pet surrender request form

First name

RAQUEL

Last name

POLANCO

Street address

989 GASCONY CT

City

KISSIMMEE

Zip code

34759

Email

raquelpolanco9@gmail.com

Phone

(321) 201-6686

Reason for surrender

no tengo donde tenerla, ya que tengo que entrgar mi casa.

My current living situation is...

I would rather not say.

Animal 1

Animal 1 name

Khloe

Animal 1 species

dog

Animal 1 dog breed

pomsky

Animal 1 size

21 - 30 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

no

Animal 1 age

1 - 2 years

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Just a few more questions...

How long have you had the animals?

4 months to 1 year

Reason(s) for concern - click all that apply.

- allergies

Administration

Shelter to client contact date

01/10/2023

Surrender necessary

yes

Staff member making appointment(s).

Dawn

Send appointment email

yes

Multiple appointments?

no

Appointment 1

Date of appointment 1

02/28/2023

Time of appointment 1

10:30 am