



No Kill Glynn County, Inc.

Shelly B. Bydlinski
President and Co-founder

OWNER SURRENDER AGREEMENT

- **Please review and sign below acknowledging the following:**
 - I certify that I am the owner of or have the authority to surrender the animal(s) described herein to No Kill Glynn County, Inc. (NKGCC).
 - I certify that the information that I have provided is accurate and truthful to the best of my knowledge.
 - I understand that in surrendering my animal(s), I am relinquishing my property rights to my animal.
 - I give No Kill Glynn County, Inc. permission to contact my veterinarian(s) and obtain any medical records for the animal(s).

- **I voluntarily surrender to NKGCC:** _____
(ex: 1 dog, 1 cat, litter of 5 kittens)

Owner's Name: _____

Phone Number: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Owner's Signature

Date

Witnessed by,

NKGCC Representative's Signature

Date

Please consider making a tax deductible donation now to help us care for the animal(s) during their stay with us. This donation will go to cover food, shelter, medical and other expenses.