

RELEASE TO THE CITY OF WESLACO

ANIMAL CARE SERVICES

I, _____ the legal owner of the animal(s) described below, release ownership and all rights to the animal(s) to the City of Weslaco.

Dog: _____

Cat: _____

Other: _____

Name: _____

Breed: _____

Sex: _____

Age: _____

Spayed/Neutered: _____

Microchip: _____

Description: _____

Has this animal bitten or scratched anyone within the past 10 days? Yes____ No____

If Yes, name the person bitten _____

Phone: _____

Date of Bite: _____

Reason for Release:

I release the City of Weslaco, its employees, agents and representatives from any, and all liability, claims, demands, or cause of action taken by the City in connection with the animal(s) including care and euthanasia.

Signature of Owner

Date