

## 1100110 11010400 1 011

## **Directions:**

This form must be printed and completed prior to surrendering your Westie. Once printed and completed, these forms must be either scanned & emailed OR mailed. Email: wpawestierescue@gmail.com OR Mail: Westie Rescue of Western PA, c/o Bob Murphy, Coordinator, 515 West Water Street, Smethport, PA 16749.

After completing both applications and mailing them OR emailing them to the Coordinator of Westie Recue of Western PA, Bob Murphy, you may then contact him at 814-598-0697.

Name of Westie	Being Released:			
Age:Se	x: Neutered? Circle:	Y N Spayed? Ci	rcle: Y N Date fixed:	
Owner(s):				
Address:				
City:		State:	Zip:	
I (we) hereby release the al		estie Rescue of Wes for adoption.	stern PA and thereby make	him/her available
I certify that I (	we) am (are) the legal own	ner(s) of this dog, fr	ee and clear of all other into	erests.
new adoptive owner and h	his/her family and heirs fro	om all claims, dema	lemnify Westie Rescue of Vands, actions, causes of action or other disposition of	on or liability of
			donation of \$50-100.00 to out to "Westie Rescue of We	
	Signa	ture of Owner(s)		
-	Signature of	Rescue Representa	ntive	
-				

Date