

Pre-Surrender Form.

This form is to be emailed to rescue@prrr.org prior to your animal being excepted into the rescue as a surrender. PRRR – Perth Rat Rescue & Rehab will us this form to assess if we have the right carer for your animal(s). By answering honestly you are assisting us in assessing if we can financially, emotionally and physically provide the proper level of care that the animals(s) require.

In the event the animal(s) are accepted into the care of PRRR – Perth Rat Rescue & Rehab, then we will require you to fill out a surrender form.

If however, we feel that PRRR – Perth Rat Rescue & Rehab cannot provide adequate care for you animal(s) at this time, we will endeavour to directly re home the said animal(s) where possible.

There is NO guarantee that by submitting this form, PRRR – Perth Rat Rescue & Rehab will be able to accept any potential surrendered animal(s) due to numerous internal factors beyond our control.

| | | |
|-------------------------------------------------------------------|---------|-------|
| Owner Details | | |
| Name : | | |
| Your DOB : mm/dd/yyyy | | |
| Address : | | |
| | | |
| | | |
| Contact # | Mobile: | Home: |
| Contact email: | | |
| Have you surrendered any animals to a rescue center prior to now? | | |
| If Yes, why? | | |
| | | |
| | | |
| Do you breed rats? | | |
| If Yes, why? | | |
| | | |

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| Surrendered animal details (ONE FORM PER RAT). | | |
|-------------------------------------------------------------------------------------------|-------|--------|
| Name: | | |
| Age: | YEARS | MONTHS |
| Colour: | | |
| Sex: | Male | Female |
| If female, could the rat be pregnant? | | |
| Health issues (Sneezing, surgery, ailments etc) | | |
| How does this rat react to being handled (biter, afraid, calm etc) | | |
| Current living environment (Loud/Quiet, other animals (dogs, cats etc), kids, other rats) | | |
| Bedding & Litter currently used: | | |
| Are you surrendering with a cage? | | |
| If YES, please provide cage make, size or description). | | |

| PRRR Office Use: |
|-------------------------|
| Date Received: |
| Date Contacted: |
| Foster Carer: |
| Direct Re-Home: |
| Reference #: |
| Accepted/Rejected: |