DOG TRANSFER OF OWNERSHIP & MICROCHIP RELEASE Date: **DOG DETAILS:** • Name: _____ • Breed: ____ • Sex: \square M \square F • Age:____ • Color/Markings: _____ • Microchip # (if known): _____ Medical Conditions: _______ • Veterinary Records : _____ **CURRENT OWNER:** • Name: _____ • Phone: I, [Current Owner], transfer ownership and responsibility of the above dog to the New Owner. I agree to release all veterinary records and microchip registration. Signature: _____ Date: _____ **NEW OWNER:** • Name: • Phone:

• Email: