PERMIT OF PET OCCUPANCY

•	Has your dog bitten anyone in the past 10 days?	
•	Is your dog aggressive toward people or other dogs?	
•	If YES to either or both questions, then we are not able to take it into our shelter. You should check your vet for sheltering. If NO , please proceed filling out this form.	ck in with
•	PROVIDE: 1) current photo of pet 2) copy of current rabies vaccination, if for dog or cat 3 food and water dishes 4) if a cat, a litter pan 5) a crate or carrier (large enough for the to move around in, and for its food and water dishes, and litter pan if a cat 6) a blanket and/or 7) collar or harness, and a leash for dogs and cats	ne animal
•	FILL IN THE FOLLOWING:	
•	Owner's Name:	
•	Pet's Name:	
•	Type of animal (dog, cat, rabbit, etc): Age: Sex: Neutered?	Y/N
•	Color and distinguishing markings:	
•	If a dog, the breed (ie. black lab, dachshund, terrier mix, etc.)	
	How does your dog or cat act around new people?	
•	How does your dog or cat act around other animals?	
•	Medical history if necessary for the day to day care of the animal.	
•	Behavior history of dog or cat to help us understand the individual animal needs	
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☐ I have read, understand and agree to abide by the Pet Care Rules contained in ATHENS, VERMONT PET-SHELTER AGREEMENT and have explained them to all other family member(s) accompanying me and my pet.
☐ Absent any gross negligence by the Athens' Weather Emergency Committee, I hereby agree to hold harmless all persons, organizations, corporations, or government agencies involved in the care and sheltering of my animal.
☐ I further agree to indemnify any persons or entities that may have suffered any loss or damage as a result of the care and sheltering of my animal, providing the loss or damage is not the result of the Athens' Weather Emergency Committee or said person/entity's gross negligence.
Date:
Owner's Name:
(please print)
Owner's Signature:
Address:
Telephone:
Email: