SURRENDER FORM
(Own Animal)

AACL Cape Town

Patient nr:	
Donation received:	

PERSONAL DETAIL

Name & Surname of owner/ representative	RICARDO JONES	Date of Surrender	12/12/25
Physical address	11 MARK STREET		
Telephone No			
Reason for surrendering animal	To many animals.		

Name of animal	Type of animal/s	Colour	Age	Sex	Sterilised
Hallelujah.	Dog	Tan & Brown.		F	Y/(N)
King	Dog.	Black, tan, white.		M	Y/(N).
					Y/N

Other detail			
Jump fences		Used to dogs	
Used to cats		Used to children	
Microchip			
Health problems / Medical history			

LEGAL
Tick All Boxes

I hereby relinquish to the AACL any and all rights of ownership that I may have in the animal, alternatively, in the event that I represent the owner, I warrant that the owner instructed me to convey to the AACL the decision to relinquish the said rights. ✓

Decisions to keep an animal for adoption or to be euthanised is based on:
(1) Availability of kennel space; (2) Suitability for adoption; (3) Health status of the animal ✓

I hereby release the AACL, its employees, agents and servants, from any liability, claims, demand or causes instituted against the AACL in connection with this animal, including its care, housing, adoptions or euthanasia. I hereby agree to hold the AACL harmless and indemnify it against any claim, cause of action or demand including legal costs in respect of the animal. ✓

I hereby hand this animal over to the Animal Anti-Cruelty League Cape Town and understand that the AACL may dispose of the animal according to Regulation 468 by adoption, euthanasia or any means as deemed fit. ✓

The undersigned hereby give their consent to the AACL CT to process the personal information for all purposes related to its services in accordance with the provisions of the Protection of Personal Information Act. ✓

Client Signature	RJones	Client Name	RICARDO JONES	Date:	12/12/25

OFFICE USE: AWA

Other detail					

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE FOREGOING STATEMENTS, CONDITIONS OF SURRENDER AND CONFIRM THE ANSWERS TO THE QUESTIONS POSED BY THE AWA. X

Client Signature	RJones	Client Name	RICARDO JONES	Date:	12/12/25
AWA Signature		AWA Name		Date:	