



Rescue Group Please Provide Information Below

1. Name Of Group: \_\_\_\_\_
2. Rescue Group Address: \_\_\_\_\_
3. Groups Email Address: \_\_\_\_\_
4. Groups Phone Number: \_\_\_\_\_
5. Veterinarian Name: \_\_\_\_\_
  - a) Phone Number: \_\_\_\_\_
  - b) Attach Written Vet Letter
  - c) Rescue Group Adoption Contract
6. Attach 501c3, Spay/Neuter Policy
7. Contact Person's Name: \_\_\_\_\_
8. Contact Person's Email Address: \_\_\_\_\_
9. Contact Person's Phone Number: \_\_\_\_\_
10. Person or persons to authorized a pull of animal(s)

Attention: There is a City Rescue agreement form that must be signed.

Please sign, fax, or email back 252-937-6959.