



Southern States Mastiff Rescue

AL, FL, GA, MS, NC, SC, TN, VA
WWW.SOSMASTIFFRESCUE.ORG

When signed scan and email to jbowers@iconengineering.net or fax to 770-592-7363
Mail Original to the State Coordinator

SSMR Mastiff ID # _____

GENERAL RELEASE FORM

To the best of my knowledge this animal does not have a bite history and

I, _____ representing _____

_____ (Name of Organization

or Individual) hereby release the Mastiff described below to **Southern States Mastiff**

Rescue:

Description of Released Mastiff

Name _____ Dog ___ Bitch _____ Color _____ Approx.

Age _____ Weight _____ Height _____ Spayed _____ Neutered _____ Date (if known)

_____ Identifying marks? _____

Microchip/Tattoo _____ Special needs or instructions

_____ _____ Date _____

Releaser Name (Printed)

Releaser Signature

Date

Volunteer Name (Printed)

_____ _____
Volunteer Signature

Releaser Street Address _____

City _____ State _____ Zip Code _____

_____ Date _____
Signature of State Coordinator

Releaser describes how this mastiff came into their possession:

