



Southern States Mastiff Rescue

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

When signed fax to 770-592-7363 within 24 hours
Mail Original to Cindy Furr 6110 Zelma Rd Lutz, FL 33558

Description cont:

Accepted by Date _____ Signature _____



Additional Comments: _____



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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 _____

Mastiff Call Name: _____

Color _____ Approx. Age _____ Approx. Weight _____ Height _____

Spayed _____ Neutered _____ Date (if known) _____

Identifying marks? _____ Microchip/Tattoo _____

Special needs or instructions _____



_____ Volunteer Name (Printed)

_____ Volunteer Signature

_____ Date



_____ Releaser Name (Printed)

_____ Releaser Signature

_____ Date

Releaser Street Address _____

City _____

State _____

Zip Code _____



_____ Signature of State Coordinator

_____ Date

Releaser describes how this mastiff came into their possession:
