

Rescue Name and Group ID#: _____

Any changes to your organization's contact info? Yes No

Street Address (P.O. Box not acceptable) _____ City _____ State _____ Zip _____

Mailing Address (if different from above) _____ City _____ State _____ Zip _____

Phone _____ Primary Contact Name _____ Website _____

Exit Authorization (Please use the space below to update your authorized list):

Primary Contact

Is the organization's representative or designee (Director, President, or Board Member) authorized to make changes to the organization's contact information and Authorized Exit list.

Authorized Exit

May contact our Supervising Animal Care Attendant about the animal they would like released. In most cases, we will contact the Primary regarding an animal available for release. **Note:** Please have Animal ID and Kennel number available.

Transporter Only

Authorized only to pick-up animals from our three shelter locations to transport to designated location arranged by Primary Contact.

1. New/Authorized to Exit Update Existing Info
 Transporter Only Primary Contact

Name (First and Last) _____

Address (P.O. Box not acceptable) _____ City _____ State _____ Zip _____

Home _____ Cell _____ Work _____ E-mail _____

2. New/Authorized to Exit Update Existing Info
 Transporter Only Primary Contact

Name (First and Last) _____

Address (P.O. Box not acceptable) _____ City _____ State _____ Zip _____

Home _____ Cell _____ Work _____ E-mail _____

3. New/Authorized to Exit Update Existing Info
 Transporter Only Primary Contact

Name (First and Last) _____

Address (P.O. Box not acceptable) _____ City _____ State _____ Zip _____

Home _____ Cell _____ Work _____ E-mail _____

4. New/Authorized to Exit Update Existing Info
 Transporter Only Primary Contact

Name (First and Last) _____

Address (P.O. Box not acceptable) _____ City _____ State _____ Zip _____

Home _____ Cell _____ Work _____ E-mail _____

Remove (Please use the space below to remove persons from your existing list):

Authorized
Signature: _____

Print Name: _____

Date: _____

5.

New/Authorized to Exit Update Existing Info
 Transporter Only Primary Contact

Name (First and Last) _____

Address (P.O. Box not acceptable) _____ City _____ State _____ Zip _____

Home _____ Cell _____ Work _____ E-mail _____

6.

New/Authorized to Exit Update Existing Info
 Transporter Only Primary Contact

Name (First and Last) _____

Address (P.O. Box not acceptable) _____ City _____ State _____ Zip _____

Home _____ Cell _____ Work _____ E-mail _____

7.

New/Authorized to Exit Update Existing Info
 Transporter Only Primary Contact

Name (First and Last) _____

Address (P.O. Box not acceptable) _____ City _____ State _____ Zip _____

Home _____ Cell _____ Work _____ E-mail _____

8.

New/Authorized to Exit Update Existing Info
 Transporter Only Primary Contact

Name (First and Last) _____

Address (P.O. Box not acceptable) _____ City _____ State _____ Zip _____

Home _____ Cell _____ Work _____ E-mail _____

9.

New/Authorized to Exit Update Existing Info
 Transporter Only Primary Contact

Name (First and Last) _____

Address (P.O. Box not acceptable) _____ City _____ State _____ Zip _____

Home _____ Cell _____ Work _____ E-mail _____

10.

New/Authorized to Exit Update Existing Info
 Transporter Only Primary Contact

Name (First and Last) _____

Address (P.O. Box not acceptable) _____ City _____ State _____ Zip _____

Home _____ Cell _____ Work _____ E-mail _____