

PLEASE ATTACH
PICTURE HERE



The Escondido Humane Society Happy Story Profile

Name: _____

Address: _____

Phone: _____

Type of Animal: _____

Name of Animal: _____

Please tell us your happy story: (You may use the back of this form if needed)

I give the Escondido Humane Society permission to use my name, my story and the above picture in brochures, publications, or any printed materials for fund raising or promotion of the Escondido Humane Society. I understand I will not receive monetary compensation for the use of this information. All photos will become property of the Escondido Humane Society and will not be returned. If this form is submitted by any one under the age of 18, a parent or legal guardian must also sign below.

Signature Date

Signature of parent or guardian Date

For office use

Animal ID #: _____

Adoption counselor: _____

Prior name of pet: _____

Comments : _____

Reason for relinquishment: _____

Date of relinquishment: _____

Date of adoption: _____

Please complete and mail to: The Escondido Humane Society
PO Box 460249
Escondido, CA 92046-0249