



**I hereby release the animal(s) named below to  
EASTRIDGE WILDLIFE REHAB**

Species \_\_\_\_\_ Date \_\_\_\_\_

Age  Adult  Juvenile  Unknown

Cause of distress \_\_\_\_\_

Finders Name \_\_\_\_\_

Address \_\_\_\_\_

City • State • Zip \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_

Location Found \_\_\_\_\_

Street • City \_\_\_\_\_

County \_\_\_\_\_

Signature \_\_\_\_\_

Referred by \_\_\_\_\_

**THANK YOU FOR CARING!**

Donations optional

\$ \_\_\_\_\_



**For office use only:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Disposition \_\_\_\_\_ Date \_\_\_\_\_