



Cat Surrender Form

Cat's Name: _____

To be considered for a surrender, you must:

- Have the knowledge and consent of all members of the household
- Be 18 years of age
- Have valid I.D and a current address
- Understand that the Northumberland Humane Society has the right to refuse your application.

Owner Information:

Name: _____

Address: _____ Apt#: _____

City: _____ Postal Code: _____

Phone #(s): _____

Email Address: _____

General Information

Gender: _____ Spayed/ Neutered: _____ Age: _____ Breed: _____

Colour: _____ What kind of ID does the cat have? Tattoo: _____ Microchip: _____

History

Why are you surrendering this cat?

If we could help you resolve this issue would you be interested in keeping the cat? _____

How long have you owned this cat? _____ Where did you acquire this cat? _____

Has your cat ever bitten anyone before? _____ If yes, under what circumstances and when?

If yes, is the incident documented with By-law, Animal Control or Public Health? _____

Medical

What veterinary clinic does the cat visit? _____

Has this cat seen a veterinarian at least once per year? Yes No Unknown

Is this cat currently up to date with vaccines? Yes No Unknown

Date of last vaccination: _____

Has this cat ever required medical surgery? Yes No Unknown

If yes, please explain: _____
Has this cat ever been diagnosed and/or treated for any medical problems? Yes No Unknown
If yes, please explain:

Is your cat currently receiving any medication? _____

Dietary Habits

Is your cat on a prescription diet? Yes No
What **BRAND of food** are you currently feeding your cat? _____

Which does your cat eat? **please select all that apply**
 Dry Only Can only Combination of both

How often and how much is your cat fed?

 Food always available Designated mealtimes

Training

Is your cat litter trained? _____ If not, how often does the cat have accidents? _____

When did the accidents begin? _____

Please describe the accidents:

Urinates outside the box Defecates outside the box Urinates on clothing/furniture
Sprays on walls/furniture Other: _____

Please describe what measures you have taken to correct this problem: _____

Has your cat been to the vet to rule out infection or another underlying health issue? _____

How many litter boxes are in the home? _____ How often is/are the litter box(es) scooped? _____

Lifestyle / Personality

To which area of the home did the cat have access? Indoors Outdoors Both

Does this cat use a scratching post? _____ or would the cat use other items? _____

If this cat lived with other cats, please describe their interaction: _____

If this cat has lived with dogs, please describe their interaction: _____

If this cat has lived with children, please describe their interaction: _____

What ages were the children? _____

How would you describe your cat's personality most of the time? _____

Please tell us some things you truly love about this cat!

Are there any quirks or habits you are not fond of in your cat? (This question helps provide shelter staff with valuable insight into your pet and can help us ensure your pet has a successful adoption. Many quirks or habits are common behaviours natural to all cat and/or have simple solutions to resolve which we can share with a future adoptive family.)

Is there anything else that you would like us to know about your cat?

The Northumberland Humane Society is a charitable community resource, dedicated to protecting and providing temporary shelter and comfort to all animals in need and promoting adoption and rehoming for abused, abandoned, neglected, and unwanted companion animals.

It relies solely on donations, bequests, and its own fundraising efforts for its very survival.

In order for its doors to remain open the continued support of the community is essential.

Why do we ask for a surrender fee? Your surrender fee goes towards:

- Providing food and general care*
- Veterinary care*
- Spaying/Neutering*
- Vaccinations, Microchipping, Deworming treatment*
- Maintenance of the shelter*

Release of Medical Information and Veterinary Records

I, _____, hereby request that _____ release
(owner/custodian) *(veterinarian)*

any information pertaining to _____ contained in the veterinary records
(name of animal/s)

at the _____ to the Northumberland Humane Society.
(clinic name)

This request and authorization is limited to the above-noted agency. This shall be your good and sufficient authority for doing so.

Dated at _____ this _____ day of _____, 20_____.

Name of owner/custodian

Signature

Name of Witness

Signature