Cat Owner Surrender & Relinquishment Form

Has this animal bitten anyone within the past 10 days? □YES* □NO
*If yes, please explain______________________________

Date of Bite:____________________

Cat’s Name:_________________________ Cat’s Age:_________________________
Reason for Surrender:_____________________________________________________

Where did you get your cat?________________________________________________
Length owned:_________________________

Describe your cat: [ ] A Family Pet [ ] For Adults Only [ ] One Person Cat [ ] Good with Everyone
[ ] Good with Older Children [ ] Other______________________________

My cat has lived with: [ ] Other Cats(s) [ ] Dogs(s) [ ] Kids (what age)________________
My cat has interacted with: [ ] Other Cats(s) [ ] Dog(s) [ ] Kids [ ] Visitors to the House
Describe your cat’s behavior around kids: [ ] n/a [ ] Ignores [ ] Gentle/Respectful [ ] Plays gently
[ ] Pounces [ ] Chases [ ] Frightened [ ] Scratches
Describe your cat’s behavior around dogs: [ ] n/a [ ] Ignores [ ] Interested [ ] Plays [ ] Hides
[ ] Chases [ ] Frightened [ ] Reactive (explain)______________________________
Describe your cat’s behavior around other cats: [ ] n/a [ ] Ignores [ ] Tolerates [ ] Plays [ ] Chases
[ ] Frightened [ ] Hides [ ] Reactive (explain)______________________________

My cat lived: [ ] Indoor Only [ ] Outdoors Only [ ] Indoor/Outdoor
My cat uses his/her litter box? [ ] Always [ ] Sometimes* [ ] Never*
If sometimes or never, please explain:_____________________________________

How often is the litter box changed? How many boxes do you have?
When your cat eliminates outside of the litter box, does he/she urinate, defecate, or both?

My cat is: [ ] not declawed [ ] front declawed [ ] front/back declawed

I would describe my cat as (check all that apply): □ Friendly □ Playful □ Active □ Curious
□ Lap loving □ Social butterfly □ Mellow □ Stubborn □ Loner
My cat (check all that apply): □ Likes to be held □ Pounces □ Climbs □ Snuggles/Sits on lap
□ Gets annoyed when petted □ Hides □ Scratches furniture
My cat is afraid of: □ Children □ Being Alone □ Men □ Thunderstorms □ Women □ Water
□ Strangers □ Vet visits
Cat’s Activity Level: □ Low □ Moderate □ High Cat’s Vocalization Level: □ Low □ Moderate □ High

What makes my cat special is:______________________________________________

For Office Use Only
Animal ID:_________________________ Intake Date:_________________________ PetPoint Entered By:______________