



Feline Owner Surrender Form

Pet ID: _____
Intake Counselor: _____

HSHC is dedicated to finding the best possible home for your animal. To do so, we rely on the information you provide us. Please answer the following questions honestly and to the best of your ability.

Cat's Name: _____ **Age:** _____

Is your cat declawed? Front Declawed All Paws Declawed Not Declawed

If declawed, how old was your cat when declawed? _____

Are you this cat's first owner? Yes No Unknown

Where did you get this cat from?

- Breeder: _____ Pet Store
- Internet Ad Rescue Group: _____
- Family / Friend Shelter: _____
- Found Stray Other: _____

Has your cat ever been to the vet? Yes No Unknown

If **yes**, what veterinary clinic did your cat go to? When was your cat last seen by the vet?

Where does your cat spend the majority of their time:

- Indoors Outdoors Both

If **not indoors**, why? How long did your cat spend outside? Was your cat supervised?

How many hours per day was your cat alone at home?

- 9+ hours 4 - 8 hours Less than 4 hours Never

How does your cat self-soothe? (grooming, hiding, sun-bathing/etc.)

How do you correct unwanted behavior?
