

Prairie's Edge Humane Society Cat Surrender Profile

Please complete and submit. You will be notified regarding an appointment.

NAME _____ EMAIL _____

PHONE _____

REASON FOR SURRENDER _____

WHERE DID YOU GET THE CAT _____ WHEN _____

FOR STRAYS: HOW LONG HAVE YOU HAD THE CAT _____ WHERE DID YOU FIND IT

(CITY AND ADDRESS) _____

NAME OF CAT _____ AGE _____

FEEDING SCHEDULE/TYPE OF FOOD/AMOUNT _____

DOES YOUR CAT HAVE LITTER BOX ISSUES/ACCIDENTS _____

WHO IS YOUR VETERINARIAN/CLINIC _____

WHEN WAS THE CAT LAST SEEN BY A VETERINARIAN _____

IS YOUR CAT SPAYED/NEUTERED _____ DECLAWED _____ ANY OTHER SURGERIES _____

IS THE CAT UP TO DATE ON VACCINATIONS _____

DESCRIBE ANY OTHER MEDICAL HISTORY/MEDICATIONS _____

HOW DOES YOUR CAT INTERACT WITH: CATS _____

DOGS _____ CHILDREN _____ UNFAMILIAR ADULTS _____

WHEN PLAYING DOES YOUR CAT EVER BITE, SCRATCH, OR EXHIBIT BEHAVIORS YOU

WOULD CONSIDER ROUGH? _____ PLEASE EXPLAIN _____

IS THE CAT INDOOR OR OUTDOOR? _____