



NO PAWS LEFT BEHIND ANIMAL SHELTER

69 Hodges Cross Rd
North Adams, MA 01247

contact@nopawsleftbehindas.org

Cat Surrender Form

Your name: _____ Number: _____

Address: _____

Email: _____

Name of pet: _____ Age _____ Breed _____ Sex _____

Is your cat spayed/neutered?: Yes _____ No _____

Why are you needing to surrender this animal? _____

Where did you get your cat?: Friend _____ Family member _____ Breeder _____ Other _____

What has the cat lived with?: Dog(s) _____ Cat(s) _____ Children (include ages) _____ Small pets (include type) _____

If not lived with, has the cat been exposed to any of the following?: Dog(s) _____ Cat(s) _____ Children (include ages) _____ Small pets (include type) _____

Is the cat good with any of the following?: Dog(s) _____ Cat(s) _____ Children (include ages) _____ Small pets (include type) _____

Is the cat NOT good with any of the following? (Check off option and EXPLAIN):
Dog(s) _____ Cat(s) _____ Children (include ages) _____ Small pets (include type) _____

Explain: _____

Does the cat have any behavioral issues (If yes, explain): _____

Is the cat fearful of anything? (If yes, explain): _____

How is the cat in new situations?: _____

Has the cat ever bitten any animal? (If yes, explain): _____

Has the cat ever bitten any person? (If yes, explain): _____

What activities does your cat enjoy? (Explain): _____

Does your cat scratch furniture? (If yes, how do you try to stop this?): Yes ___ No ___

Explain: _____

What words would you use to describe your cat? (Check off option(s): Affectionate ___
Outgoing ___ Shy ___ Anxious ___ Energetic ___ Fearful ___

Is your cat declawed?: Yes ___ No ___

Health Information

Veterinarian's Office: _____

Address: _____ Number: _____

When was your last vet visit?: _____

Is your cat up to date on vaccines?: Yes ___ No ___

Does your cat have its rabies vaccine?: Yes ___ No ___

Does your cat have any health issues?(If yes, explain): Yes ___ No ___

Explain: _____

When surrendering, it is donation based, so we ask for any donation you can to help pay for the costs of the animal being with us until it is adopted. Amount: _____

Name: _____ Signature: _____ Date: _____