



# Cat Surrender Form

Box 2126, Hanna, AB, T0J 1P0  
Ph. 403-854-3700 Cel. 403-854-0706  
Email: info@hannaspca.com www.hannaspca.com

Date: \_\_\_\_\_

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ (home) \_\_\_\_\_ (cel) \_\_\_\_\_ (work)

Email Address: \_\_\_\_\_

There is **no mandatory cost** associated with surrendering your pet; however, we ask that you consider the cost of supporting your animal while it is housed at the Hanna S.P.C.A. and provide some financial support to allow us to continue to care for your pet. Donations of food, crates, pet carriers and other supplies are also greatly appreciated. Your support enables us to care for the many animals we receive every year.

I am willing to pay a surrender fee of \$\_\_\_\_\_

Cat's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Breed: \_\_\_\_\_ Color / Markings: \_\_\_\_\_

Weight: \_\_\_\_\_ Sex / Altered: \_\_\_\_\_

If this animal is not altered, will you pay to have it done before surrendering? Yes No

I certify that I am the owner of this animal, free and clear of all other interests. I certify that this animal is not possessed of any dangerous or vicious propensities and that I have not willfully concealed information about the animal that might indicate such propensities.

By surrendering my pet to the Hanna S.P.C.A I give up all rights to this animal and revoke any rights to this animal in the future. By signing this document I understand that the surrender of this animal is final and I will have no future claim on this animal.

By signing below I certify that I have answered the questionnaire truthfully and to the best of my knowledge regarding this animal.

Pet Owner's Signature(s): \_\_\_\_\_

Witness Signature: \_\_\_\_\_(print name) \_\_\_\_\_

The purpose of this questionnaire is to help us to provide the best care and select the most compatible home for all our pets. Thank you for your patience and time completing this form. We are used to housebreaking and training so please be truthful.

Is this cat litterbox trained? Yes No Has Accidents Sometimes \_\_\_\_\_

Is this animal current on it's vaccinations? Yes No \_\_\_\_\_

Does this animal have any known health issues? on any medications? \_\_\_\_\_

Does this animal have any known allergies or food sensitivities? Yes No \_\_\_\_\_

Why are you surrendering this animal? \_\_\_\_\_

Does this animal have any problems with: Men Women Children Other Animals \_\_\_\_\_

Does this animal: Hiss, Growl, Bite, Scratch, Chew, Climb, Mark, Hide Run Away? \_\_\_\_\_

Under what circumstances? \_\_\_\_\_

How does this animal respond to new people? \_\_\_\_\_

Is this animal affectionate? Yes No

Does this animal like to be held or pet? Yes No

Is this animal cooperative during grooming? Yes No

Are you able to foster your pet until a permanent home is found? Yes No For how long? \_\_\_\_\_

Please give us any additional information that you feel may be useful such as favorite foods or activities, habits, quirks, nicknames etc. \_\_\_\_\_

**Please include any vaccination certificates or veterinary health records and feel free to donate any pet food and supplies you no longer need.**