

Cat Owner Surrender Contract

Date:	Name of Owner:	
Sox #: Phone # Home:		
	Cell:	
Description		
Name of Animal:	Date of Birth:	
	Colour:	
Sex:	Size: Weight:	
	ering this animal?	
	this animal?	
How old was this anim	mal when you acquired him/her?	
Care		
Does the cat live indo	oors, outdoor or both?	
What does he/she eat	?	
Is this cat litter traine	d? Yes / No	
Does this cat relieve i	itself outside of the litter box? Yes / No Rarely / Often	
Medical History		
Is this animal spayed	/neutered? Yes / No	
If yes: When?	Where was surgery done?	
Has your animal been	vaccinated? Yes / No	
Date: Rabies	Combo Vacc (LRCPC)	
Has your animal had	any medical concerns in the past?	
Does your animal cur	rently have any medical issues?	



Medical Certificates are important! Are you able to hand over medical records with the cat? Yes / No

Yes:				
Records provided:				
No: I authorise the release of medical reco veterinary co	•			
Pet name:				
Owner's name:				
Signed:				
The following questions are to help us c for your cat, and to help us to know how				
Does this cat get along with other cats?	Yes / No			
Does this cat get along with dogs?	Yes / No			
Does this cat get along with children?	Yes / No			
Has this cat ever shown aggression toward	ls humans or other animals? Explain:			
Other important information:				
Surrender fees: Intact Cat: \$85 Spayed/N Total surrender fee: \$	eutered Cat: \$35			
Method of payment ☐ Cash ☐ Cheque	ue E-Transfer Credit card			



I undersigned, being the owner or having control of the described animal and assuming all responsibility and releasing Humane Society Dawson (HSD) from all risk and damage that may arise from any cause, do hereby surrender the described animal to HSD. I hereby agree to indemnity and save HSD from all claims, actions or demands which may be made against it by anyone claiming to be to owner of said animal or otherwise. Signing this agreement transfers all rights of ownership from myself to HSD.

Signature of Owner:	Date:
HSD representative:	Date: