



# Oregon Outback Humane Society

P.O Box 206, Lakeview, OR 97630, 541-947-5009

## Cat Surrender Application

Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Cat Name: \_\_\_\_\_

Name (First, Last): \_\_\_\_\_ Birthdate \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

Cat Breed \_\_\_\_\_ Age \_\_\_\_\_ Weight \_\_\_\_\_

Sex \_\_\_\_ Female \_\_\_\_ Male Spayed/Neutered \_\_\_\_ Yes \_\_\_\_ No When? \_\_\_\_\_

Who is your Veterinarian? \_\_\_\_\_

Up to date on vaccinations? \_\_\_\_\_

Date of Rabies Vaccination \_\_\_\_\_ Tag # \_\_\_\_\_

Where did you acquire this cat? \_\_\_\_\_

How old was the cat when you acquired him/her? \_\_\_\_\_

How long has this cat lived with you? \_\_\_\_\_

Why are you surrendering this dog? (please circle)

*Behavioral issues*      *Time commitment*      *Family issues*      *Health issues (yours/cats)*

*Other* \_\_\_\_\_

Please explain in your own words the reason

\_\_\_\_\_  
\_\_\_\_\_

Where does the cat spend most of the time? \_\_\_\_ Inside \_\_\_\_ Outside \_\_\_\_ In & Out

Do you consider this cat a (please circle):

*Companion animal*      *Barn cat*      *Stray cat*      *Feral cat*

*Other* \_\_\_\_\_

Is the cat ever left alone in your home? \_\_\_\_ Yes \_\_\_\_ No

Is your cat free or confined? \_\_\_\_\_

If confined, where and how? \_\_\_\_\_

Is the cat litter box trained? \_\_\_\_ Yes \_\_\_\_ No      Does the cay have accidents/spray? \_\_\_\_ Yes \_\_\_\_ No

How often does your cat have accidents/spray? \_\_\_\_ Daily \_\_\_\_ Weekly \_\_\_\_ Once in a while

What other animals has the cat lived with (dogs, cats, etc)? \_\_\_\_\_

How does the cat behave with the other cats? \_\_\_\_\_

    With dogs \_\_\_\_\_

    Other animals \_\_\_\_\_

What does the cat do when it sees a dog? \_\_\_\_\_

Has the cat ever lived with children? \_\_\_\_ Yes \_\_\_\_ No If yes, what ages? \_\_\_\_\_

Is the cat good with the children (friendly/tolerant)? \_\_\_\_ Yes \_\_\_\_ No

If no, please explain \_\_\_\_\_

If the cat does not live with children, how often does it interact with children? \_\_\_\_\_

**What does the cat do when...**

A strange child runs up to it in an excited fashion? \_\_\_\_\_

A child is crying? \_\_\_\_\_

A child tries to hug it? \_\_\_\_\_

A child pets or touches it? \_\_\_\_\_

A stranger/visitor knocks on the door? \_\_\_\_\_

Has the cat ever hissed at you or anyone? \_\_\_\_\_

Has the cat ever nipped you or anyone else? \_\_\_\_\_

Has the cat ever bitten/scratched (broke skin) you or anyone else? \_\_\_\_\_

Is the cat afraid of anything? \_\_\_\_\_

Is the cat sensitive about being handles in any way? \_\_\_\_\_

Best Quality \_\_\_\_\_

**Thank you for answering these questions honestly. Everything you have told about your cat is important.**

The information you provide on this form will help us match your cat with an appropriate new foster/adoptive OOHS accepts cats based on space available and temperament assessment. Available space may delay response to this application for 2 to 3 weeks. Surrender assessments are done by appointment. Although we cannot guarantee OOHS will accept your cat, please come to a surrender appointment prepared to surrender your cat at that time.

You agree that you, your spouse, and /or any co-owner of the cat described on this form are irrevocably transferring and relinquishing to OOHS legal ownership of said cat on the date of surrender/acceptance. This gives OOHS complete authority to take whatever actions in our sole judgment are necessary and in the best interest of the cat. We understand that this can be a difficult time for you and your family. Please be assured we are working to make this situation as easy as possible for all of you. We have the best interest of your cat in mind and will do our very best to ensure s/he is given every chance possible to find a loving, forever home.

This is an application ONLY and does not obligate surrender or guarantee acceptance.

*I verify I have answered these questions honestly and to the fullest extent possible.*

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Date of Surrender/Acceptance: \_\_\_\_\_

Location: \_\_\_\_\_ By: \_\_\_\_\_

Staff comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_