**MENOMINEE ANIMAL SHELTER  
Serving the Counties of Menominee, MI and Marinette, WI**

**CAT RELINQUISMENT AGREEMENT / SURRENDER BY OWNER**

**NAME OF LEGAL OWNER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME OF PERSON SURRENDERING: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

In consideration for the acceptance by the Menominee Animal Shelter (MAS) of the animal described on this animal form, I hereby make the following representation and promise to MAS;

I am 18 years or older and am the lawful owner, (or duty authorized representative of the owner with attached written authority or upon verbal authority), of the animal described on the animal form, and I have unrestricted authority to surrender the animal to MAS. I hereby relinquish to MAS all rights of ownership that I or the legal owner may have in the animal.

I understand that MAS does not guarantee placement of the animal or the length of time that the animal will be held for adoption. The decision as to the length of time the animal will be held for adoption and its final disposition, including adoption or euthanasia, is solely at the discretion of MAS.

I understand that MAS is under no obligation to return the animal to me during the period between its surrender and its disposition. If, however, I request return of the animal during such period and MAS is willing to allow this, I will pay all expenses incurred by MAS in connection with holding and caring for the animal. I will also comply with MAS’s adoption procedures, including execution of an adoption agreement in MAS’s customary form and payment of its normal customary adoption fees.

**To the best of knowledge, the animal has not bitten anyone in the 10 days immediately prior to the date of surrender and all information about the animal given by me to MAS is true. (initial here) \_\_\_\_\_\_\_\_**

**RELEASE**

On behalf of myself, the legal owner, and my heirs, personal representatives and assigns, I hereby release, discharge indemnify and hold harmless MAS and its directors, officers, employees and agents from any and all claim, cause of action and demands of any nature, whether know or unknown, arising out of or in connection with MAS’s acceptances, care, treatment, housing or disposition of the animal.

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

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Cat Surrender Profile**

***By answering the following questions honestly, you better the chance of your animal being placed in the best home for him/her. Please help us in finding that perfect home by being honest.***

**General Information**

Cat’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age or approximate age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth (if known): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Color: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed(s) of cat:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Male □ Female □ Not sure

Spayed/neutered? □ Yes □ No □ Not sure

What type of I.D. does this cat have? □ None □ Tattoo □ Microchip □ Not sure

Is this cat declawed? □ Front □ Back □ Both

**History**

Reason you are surrendering your cat: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If we could help you resolve this issue, would you be interested in keeping your cat?: □ Yes □ No

How long have you owned your cat? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If less than 6 months, what can you tell us about the previous home? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Including your home, how many homes has this cat had? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where did you acquire this cat? □ Another shelter □ This shelter □ Found as stray

□ Born in my home □ Friend/relative □ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical History**

Your cat’s Vet:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name Address phone #

Date of shots (if known): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did your cat see a Vet at least once/year? □ Yes □ No □ Not Sure

Are his/her vaccinations current? □ Yes □ No □ Not Sure

Has this cat been severely injured or required any surgery? □ Yes □ No □ Not Sure

If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has this cat been diagnosed with and/or treated for any of the following medical conditions:   
*(check all that apply)*

□ Allergies □ Heart Disease □ Upper Respiratory disease

□ Thyroid disease □ Heart murmur □ Urinary tract infection

□ Epilepsy or seizures □ urinary tract infections □ Diabetes

□ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please explain in detail*

**Personality**

How would you describe your cat most of the time? *(Check all that apply)*

□ Friendly to family □ Shy to family □ Friendly to visitors □ Shy to visitors

□ Good with children □ Not good with children □ Very active □ Couch Potato

□ Fearful □ Fearless □ Talkative □ Solitary

□ Affectionate □ Lap cat □ More like a dog □ Playful

□ Quiet □ A “clown” □ Aloof

**Has your cat ever bitten anyone? □ Yes □ No □ Not Sure**

**If yes, did the bite break the skin? □ Yes □ No □ Not Sure**

**How many times has your cat bitten? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.   
Please explain the circumstances if your cat has bitten: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Does your cat ever get annoyed when you brush/groom him/her? □ Yes □ No

Does your cat ever pounce on your feet or ankles unexpectedly? □ Yes □ No

If yes, how often does this happen? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Play Style**

How does your cat like to play? *(Check all that apply)*

□ Plays gently, does not usually use teeth or claws □ Likes to play rough, may bite unintentionally

□ Plays well with other cats □ Plays well with dogs

□ Not much interest in play □ Other *(please explain):* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Lifestyle & Home Life**

What areas of your home did your cat have **access**? *(Check all that apply)*

□ Indoors only □ Indoors with access to outside □ Outdoors only □ Barn/shed

□ Garage or basement □ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where did your cat spend **most** of his/her time? *(Check all that apply)*

□ Bedroom □ Kitchen □ Living room □ At the window □ Barn/shed

□ Garage or basement □ Outdoors only □ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are there other animals in your home? □ No □ Other cats □ Dogs □ Birds □ Other

If this cat lived with dogs, were they □ large breed, □ small breed, □ both

If this cat lived with dogs, how did they interact? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If this cat lived with other cats, how did they interact? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If other cats in the home, how many shared a litter box? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Socialization**

Has your cat regularly been around children? □ Yes □ No □ Not Sure

If yes, indicate what ages: □ 0-2 yrs □ 3-5 yrs □ 6-10 yrs □ 11-18 yrs

If your cat lived with children under the age of 7, how did they interact? *(Check all that apply)*

□ Cat actively avoided child □ Child could pet the cat □ The cat & child played together

□ Cat hissed or growled at child □ They ignored each other □ Mutual adoration

□ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have the experiences with the cat and child(ren) always been positive? □ Yes □ No

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

Your cat is most comfortable with: □ Women □ Men □ Children □ Teenagers

□ Seniors □ Loves all people

**Dietary Habits**

What is your cat’s favorite brand of **food**? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which type of food does your cat eat? □ Dry only □ Canned only

□ Combination of dry/canned □ People food \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How often is your cat fed? □ Food always available □ Designated mealtime

What type of **treats** does your cat enjoy? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Litter Box Habits**

**We ask so many questions about litter box use because it is one of the main reasons cats are surrendered. Please help us by giving as much detailed information as possible. Sometimes a change in environment may be just what the cat needs, and sometimes there are more serious health or behavioral issues involved.**

Did your cat have access to a litter box in the house? □ Yes □ No

If yes, did your cat use the litter box? □ Yes □ No

If no, did your cat only go potty outdoors? □ Yes □ No

How many litter boxes did your cat have access to? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What kind of litter box is your cat used to? □ Open □ Hooded □ Other

How often was the litter box scooped? □ Every day □ Every few days □ Weekly □ Rarely

What types(s) of litter was used? □ Unscented □ Scented □ Clumping □ Non-clumping

Please give specific brand of litter you used: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did your cat have accidents in your home? □ Yes □ Sometimes □ Never

If yes or sometimes, how often does the cat have accidents? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe the accidents: □ Urinates outside the box □ Defecates outside the box

□ Urinates on clothing /furniture □ Sprays on walls/furniture □ All of the above

□ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If litter box accidents were an issue, when did they begin? □ Past month □ Past year □ Ongoing

Can you name an event(s) that might have influenced or triggered an inappropriate litter box use?

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

Please describe what measure you have taken to correct this problem: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has your cat been to the veterinarian to rule out infection or underlying health issues? □ Yes □ No

If yes, what was the outcome? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please add any additional comments about your cat. Thank You!

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