



INQUIRY FOR

CAT SURRENDER

Camano Animal Shelter Association

198 Can Ku Road

Camano Island, WA 98282

CamanoAnimalShelter.org

camanoshelter@yahoo.com 360-387-1902



OWNER INFORMATION

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Owner Name: _____ Age: _____
 Co-Owner: _____ Age: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Primary Phone: _____ Secondary Phone: _____
 Email: _____ Other Email: _____

Reason for Surrendering: (check all that apply)

Moving Living situation change Military transfer Not enough time Job change Financial
 Divorce Wrong fit New baby Bites Potty training issues Cannot contain Pet's health

Other Reasons: _____

How long has this cat lived with you? _____

Where did you acquire this cat?

- CASA Other shelter/rescue Breeder Pet shop
 Friend/relative Classifieds Found/stray Born in your care

If another shelter/rescue please list group's name, state, city _____

CAT INFORMATION

Cat's Name: _____ DOB: _____ Age: _____ yrs, _____ mo, _____ wk

Primary Breed: _____ Secondary: _____ Weight: _____ lbs, _____ oz

Gender: Male Female **Altered/Spayed/Neutered:** Yes No **Hair:** Short Medium Long Hairless

Color/Markings: _____ Description: _____

Microchipped: Yes No Don't Know **Microchip number:** _____

Is this cat declawed? No Yes If yes.. Front claws only Front and rear claws

Animal's Veterinarian: Clinic Name _____ Phone _____

Address _____ City _____ State _____

Doctor Name _____ (if you see a specific one)

Rabies & Other Vaccination Information: (current / due / date given) **OR** include Vaccine Certificate from your Vet

Last time the cat went to the vet: 6 months or less Within the last year 1-3 years Over 3 years ago

Does this cat have any health issues or old injuries? Yes No Details _____

Is this cat on any medication or supplements? Yes No No, but should be.

Details _____

Is this cat on a special diet or have dietary issues? Yes No RX/Vet diet

Details _____

When is this cat usually fed? AM PM Free Fed Other _____

What type of food is the cat fed? Dry/Kibble Wet/Canned Both Other _____

What BRAND and flavor/name of food was the cat fed? _____

Does the cat have any favorite toys or activities? _____

PLEASE CHECK ALL ANSWERS THAT APPLY

Where has this cat been living?

- Indoor only
- Indoor & Outdoor
- Cat-proof fenced yard
- Other _____
- Outdoor only
- Barn
- Catio / cat-proof patio

How much time is this cat kept indoors? _____ Outdoor? _____

Where does the cat stay when no one is home? _____

How many hours per day on average does this cat spend unsupervised? _____

Does this cat know how to use a cat door? Yes No

Where is this cat used to sleeping at night?

- In Owner's Room
- In Owner's Bed
- Outside
- Garage
- Patio
- Other _____

What ages of people lived with this cat?

- Adult Men
- Adult Women
- Seniors
- Children (ages) _____

How would you describe the cat's behavior around children?

- Friendly
- Playful
- Tolerant
- Afraid
- Hissy/Swats
- Doesn't like small kids
- Never been with children

How would you describe your household?

- Active
- Noisy
- Quiet
- Average

How does the cat react to visitors?

- Loves them
- Shy/Hides/Stays Away
- Doesn't Like/Hissy
- Never been around them

Does this cat use a litter box? Yes No N/A (I don't have/use a litter box)

How often does the cat have accidents in the house?

- Once a Day
- Once a Week
- Never
- Every time cat is Inside

If there are potty issues has the cat seen a vet to rule out a medical issue? Yes No

Vet Response _____

Other things have you tried to correct this _____

Has your cat ever been diagnosed with Urinary Crystals/Stones? Yes No

What type of litter do you/have you used?

- Clay/Non-Clumping
- Clumping
- Wood Pellets/Shavings
- Cat Attract
- None (cat goes outside)
- Other _____

Is this cat use to SHARING a litter box with other cats? Yes No N/A (no other cats or no litter box)

If there are other cats in the home: How many cats are there? _____ How many litter boxes in total? _____

Has this cat ever bitten or badly swiped/clawed anyone intentionally? Yes No Would Never!

If yes, explain _____

Does the cat use a scratching post and/or cat tree? Yes No I don't have one

Does the cat scratch the furniture? Yes No

This cat is used to being allowed on? Furniture Counters Tables Windowsills Sinks N/A

This cat LIKES petting on: Everywhere Head Back Bum Belly Tail _____

This cat DISLIKES petting on: Everywhere Head Back Bum Belly Tail _____

Does this cat have any bad habits a new owner should be aware of? Yes No

If yes, please describe _____

What did you do to correct the problem? _____

Is this cat frightened of anything?

- Men Women Children Brooms
- Fireworks Thunder Strangers Vacuums
- Water Dogs Hands Feet
- Other cats Other _____

What other animals has this cat lived with? Cats Dogs Birds Other _____

Does the cat have issues with any animals? No Yes _____

If yes, please describe _____

Does the cat like catnip? Yes No I don't know

Is this cat a hunter/mouser? Yes No I don't know

Does the cat have any favorite toys or activities? _____

Which words best describe this cat?

- Playful Affectionate Shy Lazy Vocal
- Rambunctious Lap cat Quiet Aloof _____

This cat is accustomed to: Nail trims Bathing Brushing Professional Grooming _____

My cat sees a specific groomer (name/phone) _____

Is there anything else we should know about this cat? _____

➔ I attest that the above given information is true and to the best of my knowledge. I am the owner of the above described cat and have the legal authority to surrender/transfer ownership said cat to another party such as C.A.S.A.

Owner Signature: _____ Date: _____

Co-owner Signature: _____ Date: _____