



Cat Resume

General Information

Cat's Name: _____ Cat's age or approximate age: _____

Cat's Sex: Male Female Is cat spayed/neutered? Yes No Unsure

Is the cat declawed? Front All Not declawed

History

Why are you surrendering your cat? _____

If surrender reason is behavioral, please explain: _____

How long have you owned your cat? _____

Including yours, how many homes has this cat had? _____

Medical History

Did the cat see a veterinarian at least once per year? Yes No Not sure

If so, which clinic? _____

Is the cat current on vaccinations? Yes No Not sure

Personality

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

- | | | | |
|---|--------------------------------------|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Friendly to family | <input type="checkbox"/> Very active | <input type="checkbox"/> A clown | <input type="checkbox"/> Couch potato |
| <input type="checkbox"/> Friendly to visitors | <input type="checkbox"/> Playful | <input type="checkbox"/> Aloof | <input type="checkbox"/> Withdrawn |
| <input type="checkbox"/> Shy to family | <input type="checkbox"/> Talkative | <input type="checkbox"/> Affectionate | <input type="checkbox"/> Independent |
| <input type="checkbox"/> Shy to visitors | <input type="checkbox"/> Quiet | <input type="checkbox"/> Lap cat | <input type="checkbox"/> Playful |
| <input type="checkbox"/> More like a dog | <input type="checkbox"/> Fearful | <input type="checkbox"/> Fearless | <input type="checkbox"/> Solitary |

Habits

Does the cat:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Claw furniture | <input type="checkbox"/> Urinate/spray on items | <input type="checkbox"/> Claw drapes | <input type="checkbox"/> Kill rodents or birds |
| <input type="checkbox"/> Use scratching post | <input type="checkbox"/> Chew plants | <input type="checkbox"/> Dig in plants | <input type="checkbox"/> Get on furniture |
| <input type="checkbox"/> Get on counters | <input type="checkbox"/> Get on the bed | <input type="checkbox"/> Go out doors | |

Has your cat bitten in the last ten (10) days? Yes No

If yes explain: _____

Play Style

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

- | | |
|--|--|
| <input type="checkbox"/> Plays gently, does not usually use teeth or claws | <input type="checkbox"/> Likes to play with dogs |
| <input type="checkbox"/> Likes to play rough, may bite or scratch | <input type="checkbox"/> Not interested in play |
| <input type="checkbox"/> Likes to chase & pounce with variety of toys | <input type="checkbox"/> Likes to play hide & seek |
| <input type="checkbox"/> Likes things that crackle, such as paper bags | <input type="checkbox"/> Chases bugs or moths |
| <input type="checkbox"/> Will fetch items like bottle caps or toys | <input type="checkbox"/> Likes to learn tricks for treat |
| <input type="checkbox"/> Likes to play in or around water | <input type="checkbox"/> Likes to play with other cats |

Lifestyle & Home Life

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

- Indoors only Outdoors only Indoors at night Garage/basement
- In barn or shed Screened porch Indoors with access to outside Other

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

- Bedroom Kitchen Living room Garage or basement
- At the window Outdoors only Barn or shed Where people are
- Whole house Other

If this cat has lived with other cats, how did they interact? *(check all that apply)*

- Adored each other Played together Sniffed noses Ignored each other
- Rough with others Groomed each other Slept near each other Fought with injuries
- Gentle with others Fought without injuries Peacefully coexisted

If this cat has lived with dogs, how did they interact? *(check all that apply)*

- Adored each other Played together Sniffed noses Groomed each other
- Slept near each other Ignored each other Cat feared dog Fought with injuries
- Caused this cat stress Dog chased cat Cat rubbed on dog Cat tormented dog
- Avoided each other Peacefully coexisted

Has the cat regularly been around children? Yes No Unsure

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

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

If no, please explain: _____

Is this cat more comfortable with: Women Men Kids Teenagers Seniors All people

How would you describe the ideal home for your cat? _____

Please tell us some things you truly love about this cat. _____

Are there any quirks or habits you are not fond of in your cat? _____

Dietary Habits

What is the cat's favorite brand of food? _____

What type of treats does your cat enjoy? _____

How often is your cat fed? Food always available Designated mealtimes

Litter box Habits

Is you cat litter boxed trained? Yes No

What type(s) of litter was used? Unscented Scented Clumping Non-Clumping Crystals
 Clay Pine Yesterday's News Other

Please tell us any additional comments about your feline friend: _____



CAT SURRENDERING FORM

PLEASE ENCLOSE A COMPLETE COPY OF YOUR PETS MEDICAL RECORDS WITH THIS FORM

No one knows and loves your cat the way you do! In order to find the most appropriate home for your cat, please provide as much detail as possible. Behavioral and medical issues do not necessarily create problems, but failing to disclose them certainly does!

We ask for a complete copy of current medical records stating that the animal is current on all vaccinations.

Surrendering fees help to offset the costs of veterinary care for rescued animals.

**If you are placing your animal up for adoption because of a behavior or medical problem,
YOU MUST DISCLOSE THIS PROBLEM TO US.**

Please Print:

Name of Cat(s): 1. _____ 2. _____ 3. _____

Breed: _____ Color: _____

Your Name _____

Address _____ City _____ State _____ Zip _____

Home Phone: (____) _____ Work Phone: (____) _____

How did you hear about Savannah Cat Club's Rescue
Program? _____

I represent and warrant that I am the lawful owner/agent of the Animal(s) and that I have disclosed to Savannah Cat Club Rescue. all material information regarding the medical and behavioral history of the Animal(s).

I understand that by releasing the Animal(s) to Savannah Cat Club Rescue. I relinquish all ownership or other interest in the Animal(s). I hereby release and forever discharge Savannah Cat Club Rescue. from any and all rights, claims, obligations, liabilities, and causes of action whatsoever arising out of or relating to the ownership, possession, or disposition of the Animal(s). And I agree to indemnify and hold harmless Savannah Cat Club Rescue from and against any and all such rights, claims, obligations, liabilities, and causes of action which may be asserted by third parties. I further acknowledge that I am releasing the Animal(s) completely voluntarily and that no representations or promises of any kind have been made to me by Savannah Cat Club Rescue or any of its agents.

Surrendering Party Signature _____ Date _____

Approved by Authorized Volunteer _____ Date _____

Would you like to make a Surrendering Donation: \$ _____

Thank You, Savannah Cat Club Rescue