



# SURRENDER FORM

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Micro-chip #: \_\_\_\_\_ Shelterluv ID TLC-A-\_\_\_\_\_

**STRAY cat/kitten:** Date found: \_\_\_\_\_ Location found: \_\_\_\_\_  
 Zip code \_\_\_\_\_ Reported found anywhere?  Yes  No Where: \_\_\_\_\_

**OWNER cat/kitten:** Is this cat:  TLC return  Spayed/Neutered  
 Was this cat adopted from another rescue? Please state the group, location and cat's original name and approximate date in which the cat was adopted: \_\_\_\_\_  
 Is this cat accustomed to:  indoors  outdoors  children  cats  dogs

**Cat's Name (if any)** \_\_\_\_\_ **Age (if known)** \_\_\_\_\_  
**1st color:** \_\_\_\_\_ **2nd color:** \_\_\_\_\_  FIV+  Declawed  
**Fur length:** SHORT MEDIUM LONG **Pattern:** \_\_\_\_\_ **Breed:** \_\_\_\_\_  
**Gender:**  Female  Spayed Female  Male  Neutered Male  UNKNOWN  
**Tell us, WHY the cat is being surrendered or the situation in which the cat was found:**  
 \_\_\_\_\_  
 \_\_\_\_\_

If known, what is the typical diet of this cat: Dry Brand: \_\_\_\_\_ Wet Brand: \_\_\_\_\_

In the event that this cat is found to have severe pre-existing medical conditions by our vet, will you be willing to help pay for any expenses incurred? \_\_ Yes \_\_ No

Please keep in mind that any cat/kitten surrendered will cost Ten Lives Club a minimum of \$85-150, which includes health evaluation, testing, vaccines, worming, flea preventive, micro-chip, spay/neuter, as well as cost of food and litter.

*I am surrendering the cat/kitten described above to Ten Lives Club. I understand this animal will be evaluated for health and adoptability prior to being put up for adoption.*

Signature: \_\_\_\_\_ ID number: \_\_\_\_\_

Donation: \_\_\_\_\_ TLC/Staff taking in surrender: \_\_\_\_\_