

241 Steedly Drive  
Louisville, KY 40214  
502-366-3355 x. 2201  
www.kyhumane.org

Before surrendering your pet, allow one of our trained volunteers or staff to help! Please contact our FREE Pet Help Line first. You can get FREE behavior help, information on pet friendly housing, food banks, lower cost vet services and clinics, referrals and much more!

Call (502) 509-4PET (4738) • Go to [www.kyhumane.org/help](http://www.kyhumane.org/help)

Thank you for contacting the Kentucky Humane Society about surrendering your pet. Attached is our owner surrender form. Please complete this form and return to us.

Once we have reviewed the completed form, a Pet Help Line staff member will contact you regarding a surrender appointment.

As a private, nonprofit agency, KHS has made a commitment to save every healthy, behaviorally sound pet who comes through our doors and to never euthanize a pet because of lack of space. Because of this commitment, there may times when we are unable to accept every pet due to space limitations. When this occurs, we will schedule an appointment for the next available opening or do our best to help owners find alternative solutions.

There are some circumstances where animals cannot be placed up for adoption. These include:

- When animals show signs of aggression or severe behavior issues that cannot be treated through our Behavior Modification Program and/or are a danger to humans or other pets. Please be aware that an animal that is friendly in your home may react differently towards strangers in the stressful shelter environment.
- When a veterinarian, after examination, determines the animal is too ill to be adopted.

In cases when pets are deemed unadoptable, the owner or finder can choose to be notified and can pick up the pet within 24 hours.

Surrendering your pet to a sheltering agency should be considered a last resort. Please consider all available alternatives. This may include rehoming your animal, behavior training or support for medical care. Our Pet Help Line staff would be happy to discuss alternatives that might keep your pet in the home. They can be reached at 502-509-4738 or [helpline@kyhumane.org](mailto:helpline@kyhumane.org).

Owner Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

# Cat Owner Questionnaire

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 about history, past veterinary care, likes, dislikes, and quirks of your feline friend.

Has your cat bitten in the last ten (10) days? \_\_\_\_\_

Has your cat ever bitten anyone or another animal and drawn blood? \_\_\_\_\_

## General Information

Shelter Arrival Date: \_\_\_\_\_ Cat's age or approximate age: \_\_\_\_\_

Cat's Name: \_\_\_\_\_

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

Is the cat Microchipped?  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: \_\_\_\_\_

If we could help you resolve this issue would you be interested in keeping the cat? \_\_\_\_\_

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

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

Where did you acquire this cat?

- From KHS  Another shelter  Breeder  
 Found as a stray  Newspaper Ad  Friend/relative  
 Pet Store  Born in my home  Other

## Medical

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

If so, what clinic? \_\_\_\_\_

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

- Upper Respiratory Infection  Allergies  Heart murmur Tumors  
 Epilepsy or seizures  Organ failure  Thyroid disease Diabetes  
 Urinary tract infection  Cancer  
 Surgery (please explain) \_\_\_\_\_  
 Other (please explain) \_\_\_\_\_

# Cat Owner Questionnaire

## 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"/> Affectionate |
| <input type="checkbox"/> Friendly to visitors | <input type="checkbox"/> Quiet       | <input type="checkbox"/> Lap cat      |
| <input type="checkbox"/> Shy to family        | <input type="checkbox"/> Fearful     | <input type="checkbox"/> Playful      |
| <input type="checkbox"/> Shy to visitors      | <input type="checkbox"/> Independent | <input type="checkbox"/> Couch potato |

## Play Style

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

- Plays gently, does not generally use teeth or claws
- Likes to play rough, may bite or scratch
- Likes to chase and pounce with a variety of toys
- Likes things that crackle, such as paper bags
- Likes to play with other cats
- Likes to play with dogs
- Other \_\_\_\_\_

## Lifestyle and Home Life

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

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Indoors only       | <input type="checkbox"/> Outdoors only            | <input type="checkbox"/> Indoors at night                  |
| <input type="checkbox"/> Garage or basement | <input type="checkbox"/> Indoors in cold weather  | <input type="checkbox"/> In barn or shed                   |
| <input type="checkbox"/> Screened porch     | <input type="checkbox"/> Outdoors in warm weather | <input type="checkbox"/> Indoors without access to outside |

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

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Adored each other            | <input type="checkbox"/> Played together      | <input type="checkbox"/> Fought without injuries |
| <input type="checkbox"/> Caused this cat stress       | <input type="checkbox"/> Peacefully coexisted | <input type="checkbox"/> Ignored each other      |
| <input type="checkbox"/> Rough with each other        | <input type="checkbox"/> Fought with injuries |  |
| <input type="checkbox"/> Other (please explain) _____ |   |  |

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

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Adored each other  | <input type="checkbox"/> Played together              | <input type="checkbox"/> Cat tormented dog       |
| <input type="checkbox"/> Avoided each other | <input type="checkbox"/> Peacefully coexisted         | <input type="checkbox"/> Ignored each other      |
| <input type="checkbox"/> Cat feared dog     | <input type="checkbox"/> Fought with injuries         | <input type="checkbox"/> Fought without injuries |
| <input type="checkbox"/> Dog chased cat     | <input type="checkbox"/> Other (please explain) _____ |  |

Did your cat live with children in your home?  Yes  No

If so, what ages? \_\_\_\_\_

# Cat Owner Questionnaire

How does the cat interact with children? (check all that apply)

- Cat actively avoided child       Child could pet cat      Mutual adoration  
 Ignored each other       Cat and child played together       Aggressive towards child  
 Other (please explain) \_\_\_\_\_

Is the cat more comfortable with:

- Women       Men       Kids  
 Teenagers       Seniors       Loves all people

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? \_\_\_\_\_  
\_\_\_\_\_

Does the cat do any of the following? (check all that apply)

- Jump on the counter       Scratch furniture       Chew plants  
 Scratches doors/cabinets       Chews person items       Climbs curtains  
 Other (please explain) \_\_\_\_\_

## Dietary Habits

What is the cat's favorite brand of food? \_\_\_\_\_

Which does your cat eat?  Dry only     Canned only     Combination of dry and canned  
 People food \_\_\_\_\_

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

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

## Litter Box Habits

Is the litter box:  Covered     Uncovered

Where is the litter box(es) located in the house? \_\_\_\_\_

Does the cat ever have accidents outside of the litter box?  Yes     No     Sometimes

Please describe the accidents (check all that apply)

- Urinates outside the box       Urinates on clothing/furniture  
 Defecates outside the box       Sprays on clothing/furniture  
 Sometimes misses the box       Other \_\_\_\_\_

If litter box accidents are an issue, how long ago did they begin? \_\_\_\_\_

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

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

# Cat Owner Questionnaire

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

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

What type(s) of litter was used?

- Unscented       Scented       Clumping       Non-clumping
- Crystals       Clay       Pine       Yesterday's News
- Other \_\_\_\_\_

Are there any other animals in your home?

- No       Other cats       Dogs       Birds       Rodents       Other \_\_\_\_\_

If other cats, how many shared a litter box?

- One     Two     Three or more

Please share any additional comments about your feline friend

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Staff Notes: \_\_\_\_\_

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