



General Information

Cat's name \*

Cat's age or approximate age \*

Cat's Breed

Cat's sex

- Male
- Female
- Unsure

Is your cat spayed/neutered?

- Yes
- No
- Unsure

Does your cat have a Tattoo?

- Yes
- No

Where is it located?

Does your cat have a microchip

- Yes
- No
- Unsure

Is your cat declawed?

- Yes
- No

How long have you owned this cat?

Where did you acquire this cat? \*

- SafeHaven Humane Society
- Other Shelter/Rescue Organization
- Found as a stray
- Breeder/Pet Store
- Private Party/Courtesy Posting
- Family/Relative

Name of Other Shelter/ Rescue Organization \*

Has your cat bitten anyone or any animals?

Yes

Did your cat draw blood?

Yes

No

No

Has your cat bitten anyone or any animal in the last ten (10) days? \*

Yes

Did your cat draw blood?

Yes

No

No

### History

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Why are you rehoming your cat?

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

What would you like the new owners to know about this cat?

Has your cat ever been seen by a veterinarian?

Yes    What Clinic?

No

Are there places on this cat's body where they do not like to be touched?

Yes    Where?

No

Does your cat have any known medical conditions?

Yes    If yes, please explain:

No

Is your cat currently on any medication?

Yes    What medication:

No

### Home Life, Training & Manners

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What are your cat's favorite things to do? i.e. favorite toys, treats and/or activities.

What is your cat's favorite food or treat?

Does your cat use a scratcher?

Yes

No

What areas of your home did the cat have access to?

Indoors only

Outdoors only

Indoors/Outdoors

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

- Affectionate
- Playful
- Lap cat
- Friendly with visitors
- Shy with family
- Shy with visitors
- Independent
- Very active
- Not very active
- Feisty
- Uses mouth/claws in play

Does your cat live with any of the following? \*

- Dogs (Large)
- Dogs (Small)
- Cats
- Small Animals
- Livestock
- Children

Would you recommend placing this cat in a home with other cats? \*

- Yes
- No

Would you recommend placing this cat in a home with dogs? \*

- Yes
- No

Would you recommend this cat be around children regularly? \*

- Yes
- No

Does your cat have access to a litter box in the house? \*

- Yes
- No

How many cats shared the litter box? \*

Does your cat urinate or defecate outside of the litter box? (litter box misuse)

- Yes
- No

Is there anything else you would like us to know about this pet?

## Your Information

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Your Name \*

First

Last

Please enter your address below

Street address

City

State

Zip code

Your Phone Number \*

Email address \*