EASTERLEIGH
Animal Sanctuary

"A SAFE HAVEN FOR ALL ANIMALS"

SURRENDER of a CAT

Name (of person handing over the cat):	
Address:	
Contact Number:	
E Mail:	
Vets Name and Address:	
Cat Name:	
Cat Age:	
Cat Sex:	
Neutered:	
Micro chipped:	

Microchip Number:

Vaccinated:

Vaccination Certificate presented:

Flea and Worm Treatment:

Date of last treatment:

Medical issues:

Dietary requirements:

Allergies:

Medication:

What medication has been handed over:

House cat or Outdoor cat:

Species/Breed /Colour:

Lived with:

DOGS

CATS

CHILDREN

OTHER

Where did you originally get the cat from:	
How long has the cat lived with you:	
Reason for Surrender:	

Thank you for your application to surrender your cat a member of our Animal Welfare Team will be in contact within 5 working days to discuss a suitable placement for your cat.

I herby relinquish full ownership of the said animal to the care of Easterleigh Animal Sanctuary. The information I have supplied is correct to the best of my knowledge. If handing over the animal on behalf of someone else I have received full permission to do so (in this case please write the full details of the registered owner on the bottom of this form). I will cooperate and provide further information if the charity should require it in the future.

Signed:

Date:

Signed on behalf of:

Address of owner:

By submitting this form, you are consenting for Easterleigh to hold your personal data electronically. We promise never to share this data with any third party organisation. You are free to request the deletion of this data at any time.[1]