



Animal Surrender Form

Please complete this form to the best of your ability. Please print clearly.

Owner Name(s): _____

Animal Surrender Information

Please list the name, physical description, age, and gender of each animal:

- Animal 1 _____
- Animal 2 _____
- Animal 3 _____
- Animal 4 _____
- Animal 5 _____

Please describe the reason(s) for surrender:

Animal Health Information & Medical Records *(optional)*

This section is optional to complete. Please provide any relevant health information and/or medical records for each animal including vaccination history, if spayed or neutered, specific health problems, behavioral issues, and the current veterinary clinic where records can be obtained (attach additional pages as necessary).



Animal Surrender Acknowledgement

Please read the below carefully.

I hereby release and surrender all property rights which I hold in the animal(s) described above. I certify that no other person has a right to property in the described animal(s), and that I have the legal authority to determine ownership of the animal(s). I understand that falsely representing the ownership of the animal to an animal rescue group or shelter is a Class 1 misdemeanor under Virginia code section 18.2-144.2, carrying a maximum penalty of 12 months in jail and a \$2,500 fine.

Cat Action Team (CAT) will make every effort to medically treat and rehome the animal(s). However, a licensed veterinarian may recommend euthanasia as the most humane treatment for a severely wounded or diseased animal. I understand and acknowledge that the animal(s) described above may need to be euthanized as the most humane procedure. CAT does not euthanize healthy animals for any reason.

To the best of my knowledge, I certify that the animal(s) I am releasing to the care of CAT ___ HAS / ___ HAS NOT previously bitten a person or other animal. If you check "HAS," please briefly explain the circumstances of each bite below, including the date of each bite, if known (attach additional pages as necessary).

Print Name

Signature

Date

Print Name

Signature

Date