



Cat Transfer In/Release

Cat Name:		
Sex:	☐ Male	☐ Female
Description:		
DOB:		
Source:	☐ Community Cat Colony ☐ Private Home ☐ Shelter ☐ Farm ☐ Other:	

Transfer From:

Name:	
Org Name:	
Phone:	
Address:	
City/State/Zip:	
Email Address:	

Cat Medical Background:

Type	Date	Comment
☐ Neuter ☐ Spay		
Rabies		
Distemper #1		
Distemper #2		
Microchip		
Other:		

Preferences:

Comment	Schedule



Cat Transfer In/Release

Personality

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Gets along with	☐ Cats	☐ Dogs	☐ Little Kids	☐ Kids over 11	☐ Plants
Please describe any concerning behavior about this cat below, including litter box issues, disruptive behavior or aggression. Please detail any attempts you have made to change this behavior and any medical screenings that have been conducted to rule out underlying causes:					
Known Issues	☐ Cats	☐ Dogs	☐ Little Kids	☐ Kids over 11	☐ Plants
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