Great Lakes Bengal Rescue, Inc. www.greatlakesbengalrescue.com

surrender@greatlakesbengalrescue.com Phone #: 502-494-8669 Fax #: 502-494-8669

SURRENDER CONTRACT

I,	(hereinafter referred to as "OWNER"), state				
(here	am the legal and sole Owner of the Kitten/Cat namedinafter referred to as "CAT"). If I am NOT the owner, I have power of attorney for				
the pa	arty I am acting for, and a copy of the POA is attached.				
•	• OWNER understands that by surrendering CAT to the individual listed in the signature block below (hereinafter referred to as the "FOSTER"), OWNER withdraws all claims to CAT.				
•	OWNER understands that FOSTER is not liable for any debts which have been incurred prior the date listed below as may pertain to CAT.				
•	• OWNER understands that they are solely responsible for any debts incurred prior to the date l below as may pertain to CAT.				
•	• OWNER further understands that the act of "surrendering" CAT to FOSTER is done without compensation to OWNER. OWNER understands that when the cat is surrendered, they loose all ownership rights and that there is no 'reclaim' grace period.				
•	• OWNER further understands that FOSTER may assign ownership of CAT to any other individual as determined by FOSTER to be a suitable adopter for CAT.				
•	• OWNER further understands that FOSTER is not required to provide any information regarding the placement or location of CAT after OWNER surrenders CAT to FOSTER, but will provide general non-identifying information about the home the cat goes to, if requested.				
•	OWNER further agrees to provide proof of spay/neuter, UTD on vaccines, rabies and health check has been done and have health records stating such on said cat before surrounding to FOSTER.				
	LEGAL FEES incurred in upholding this Agreement will be paid by OWNER. se is in the State of Kentucky.				
	ER'S SIGNATURE INDICATES UNDERSTANDING AND AGREEMENT TO THE ABOVE DITIONS AND TERMS.				
Own	er Signature Date				
Print	Name				
Great	t Lakes Bengal Representative Date				

Rev. 7/08 Page 1 of 3

INTAKE FORM

Donations are greatly appreciated when accepting your surrendered feline(s) to cover the necessary costs of medical care, food / litter and future transportation of your pet.

CAT INFORMATION

Name of Cat / Kitten:							
Breed: Bengal		Color/Pattern:					
Sex: Altered Male	Altered Female	Unaltered Male	Unaltered Female				
Declaw:	All Paw Clawed	Front Paw Declaw	All Paw Declaw				
Breeder Name:		Breeder Phone:					
DOB (May be approximate):							
SURRENDERED BY:							
Name:		Date:					
Address:		City, State, Zip:					
Phone #:		Cell Phone #:					
Email Address:		Birth Date:					
Any other previous owners? If so, please note contact information below:							
Special Items / Facts to b	e noted about feline:						

Rev. 7/08 Page 2 of 3

Information is collected to insure the stress and transfer of this cat be minimized and inform the future home of current needs / habits.

Current Food Brand/Type:	\rightarrow	Amount Given Daily:	
Treat Type:		How Often:	
Food Allergies:			
Favorite Toys:			
Sleeping Arrangements:			
Litter BOX type:	\rightarrow	Brand of Litter:	
Type of Litter Used: Clay Scoopable	_	Other:	
Litter Box Problems:			
Bites:		→ When:	
Scratches:		→ When:	
Grooming Preferences:		How Often:	
Claw Trimming Tolerance:			
Type of Clippers:			
Halter Tolerance:			
Vocal:	\rightarrow	Occurrences:	
Vocal:	-		
Current Medical Concerns Runny Eyes Runny Stool Over/Underweight Fleas / Ear mites Runny Nose / Sneezing / Wheezing Current Medications (list below):			
Behavioral Scratches Furniture Eats / Chews Plants Gets on Counters / Tables Ok to Hold / Carry Gets along with (check all that apply) Men Women >12 Age Child Lg Dogs Sml Dogs Other Cats	☐ <12	Age Child ☐ Infants ☐ Other Pets	

Rev. 7/08 Page 3 of 3