

Northwoods Humane Society
PO Box 82, Hayward WI 54843
715/634-5394

STRAY SURRENDER FORM

Date _____ Notified _____ PF _____

Please Write Clearly!

Name _____ Phone# _____

Street Address _____

City _____ State _____ Zip _____

Email address _____

Male _____ Female _____ Stray cat _____ Stray dog _____

Breed: _____

Color/markings: _____

Age: Adult _____ Puppy _____ Kitten _____

Any obvious injuries? _____

General behavior (shy, aggressive, etc.) _____

If this is a cat, can it be picked up? Yes _____ No _____

Does this seem to be a feral cat? Yes _____ No _____

Behavior around kids: _____

Behavior around other animals: _____

Has this animal bitten anyone? Yes _____ No _____

How long have you had this animal? _____

Exact address this animal was found. _____

Did you contact Sawyer County Animal Control, 634-5213? Yes _____ No _____

Did you contact LCO Animal Control? Yes _____ No _____

As agent of the animal described herein, I assign responsibility to the Northwoods Humane Society Inc. According to state statutes, NHS is obligated to hold a stray cat for 3 days, during the time, NHS will advertise the finding of the cat and will use the above information as proof of ownership. Please type your name in the box as electronic authorization.

Signature

6/2020