



## Last Litter Kitten Surrender Request Form

Please complete the form below about the mother cat and kittens to be surrendered.

PAWS works to reduce pet overpopulation, help prevent unplanned litters and ensure that every animal in our community has a home.

Through the **Last Litter Program**, PAWS offers FREE spay surgery for any female cat whose offspring (kittens) is surrendered to the shelter for our adoption program!

### ***How it works:***

Work with our Shelter Director to schedule a surrender appointment for your pet's offspring.

- Kittens must be weaned.
- There is no surrender fee for kittens

When you bring the babies in for surrender, we will schedule a date for a free spay surgery for your pet through the PAWS Spay/Neuter program.

You can rest easy, PAWS will get your pet's babies vaccinated, treated for worms and fleas, spay/neutered, microchipped, and will find them great homes

*The Last Litter program is only open to residents of the town of Appleton, Belmont, Camden, Rockport, Lincolnville, Belfast, Hope, Northport, Searsmont, Liberty, Islesboro and Swanville.*

**Your Name \***

**Your Email \***

**Your Phone \***

**Your Address \***

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Country

**Why do you want to surrender this litter? (Check all that apply) \***

Financial Reasons

Behavioral Reasons

Will not use the litter box

Moving and cannot take the cat

Change in my family

Personal illness

Animal illness

**Mother Cats Name \***

**Breed \***

**Color(s) \***

## Weight

Age: \*

How Many Kitten will you be surrendering from this litter? \*

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9+

Socialization of the kittens \*

- Sweet and social
- A little shy but warms up when you're nice
- Very shy
- Fearful
- Aggressive
- Barn Cat / Feral

Is the mother cat current on all vaccinations (Rabies / Distemper) \*

- Rabies
- Distemper

When was the last time you administered a Flea & Tick preventative/medication

**Is your mother cat FIV+ \***

Yes

No

Unknown

**Does your mother cat have Feline Leukemia? \***

Yes

No

Inknown

**Does your mother cat have any medical conditions, special diets, etc.... please explain:**

**Can you provide vet records for this animal? \***

Yes

No

**If you have taken this animal to the Vet, please provide the Veterinary contact info (clinic, Dr. etc)**

**Check to acknowledge your understand of and acceptance of the following \***

I understand that by surrendering ownership of this animal(s), I am forfeiting the right to adopt this animal(s).

I am the legal owner of the animal(s)

I understand that MUST have the mother cat spayed ASAP through the PAWs S/N Clinic and that I will not be charged for the procedure.

You will be contacted within 48 hours with additional information and to schedule a surrender date for the kittens.

**Just to be clear. When you surrender any animal, you will not be allowed to adopt this animal back at any point.**

**Please mail this form to :**  
PAWS Animal Adoption Center  
P.O. Box 707  
Rockport, Maine 04856