



Humane Society of Northwest Montana

100 Adopt-a-Pet Way

Kalispell, MT 59901

Phone: (406) 752-7297

Fax: (406) 755-7388

Surrender Form – Litter

Please complete this form to be added to our surrender waitlist. One form must be completed for each litter.

Please be as honest as possible to help place the animals in a permanent home best suited to its needs.

Your Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Surrendering: Kittens _____ Puppies _____ Age of Litter: _____

of Females _____ Males _____ Breed, if known: _____

Names / Descriptions

- | | | |
|----------|-----------|-----------|
| 1. _____ | 6. _____ | 11. _____ |
| 2. _____ | 7. _____ | 12. _____ |
| 3. _____ | 8. _____ | 13. _____ |
| 4. _____ | 9. _____ | 14. _____ |
| 5. _____ | 10. _____ | 15. _____ |

Colors: _____

Have the kittens / puppies been weaned from the mother? Yes _____ No _____

Have they been vaccinated? Yes _____ No _____ If yes, when? _____

Where did this litter come from?

____ Family pet ____ Found abandoned by mother ____ Found abandoned by human caretakers
____ Foster family ____ Rescue operation/other shelter ____ Other? _____

Medical or behavioral issues? _____

Do you have vaccination medical records to give to the new owners? _____

Do you have vaccination medical records on the mother of the litter? _____

Vet Clinic Name: _____ Phone: _____

May we contact the clinic to get copies of records? Yes _____ No: _____