



3100 Cherry Hill Road • Ann Arbor, MI 48105
734-662-5585 • www.hshv.org

Other Domestic Owner Relinquish Profile

What is your pet's Name: _____ Species: _____

How old is your pet: _____ Male/Female: _____ Spay/Neutered?: _____

How long have you had him/her? _____

Where did you get your pet from originally? _____

Please be specific (i.e. Petco, Petland, breeder)

Why are you bringing this pet to the Humane Society? **(Please be specific)**

Has the pet been kept? Inside Outside Both

Is the pet litter box trained? Yes No

What kind of bedding/litter does your pet use? _____

What does your pet eat? **(Please be specific)** _____

• How much does the pet eat a day? _____

• What treats does the pet prefer?

When was your pet last seen by a vet? _____

Who is your pet's vet (Name, Phone, and City)?

Has your pet ever had any health problems? Yes No If yes, please explain

When it comes to handling, your pet (check all that apply):

Likes to be held Enjoys being petted Is nervous Prefers to keep to itself

How much time does your pet spend outside of a cage per day?

- Less than ½ hour 1-2 hours 3-4 hours 4-6 hours 7-8 hours All day

Does your pet like children? Yes No Unsure

If you have children, what are their ages? _____

Has your pet ever been around (check all that apply):

- Cats Dogs Rabbits Other pets, list: _____

If yes, what was his/her response?

What games and toys does your pet enjoy?

What are your pet's best qualities?

If you could change one of your pet's habits, what would it be?
