Pet Guardianship Program: CAT BIOGRAPHY

No one knows and loves your cat the way you do. As a member of our Pet Guardianship Program, your pet is a priority to us, and we commit to you that we will do our best to find the ideal home for them if/when they come into our care.

YOUR CONTACT INFORMATION

Your Name: _____ Email: _____

Address: _____ Day Phone: _____

City/State/Zip: _____ Evening Phone: _____

Today's Date: _____ Other Phone: _____

DESCRIPTION OF YOUR CAT and BASIC HISTORY

Cat's Name: _____ Age: _____ Sex: ❑ Male ❑ Female Altered: ❑ Yes ❑ No

Breed: _____ Does your cat have a microchip? ❑ Yes ❑ No Chip #: _____

Color: _____

Was your cat adopted from Humane Society Silicon Valley? ❑ Yes ❑ No

Would you recommend placing this cat in a home with **children**? ❑ Yes ❑ No

Would you recommend placing this cat in a home with **other cats**? ❑ Yes ❑ No

Would you recommend placing this cat in a home with **dogs**? ❑ Yes ❑ No

Where does your cat live (*check all that apply*):

❑ Indoors only ❑ Inside mostly ❑ Inside and outside equally

❑ Only outside with supervision ❑ Outside and in garage ❑ Outdoors only

❑ Other (*please explain*): _____

Name and location of your cat's veterinarian:

_____

_____

Has your cat ever been diagnosed or treated for any of the following by a veterinarian *(check all that apply)*:

❑ Urinary blockage ❑ Ringworm ❑ Upper respiratory infection/conjuctivitis

❑ Digestive problems ❑ Ear mites ❑ Urinary tract infection

❑ Broken bone(s) ❑ Diabetes ❑ Thyroid disease

❑ Kidney or liver problems ❑ Compulsive grooming ❑ Tumors and/or Cancer

❑ Required surgery ❑ Flea allergies or skin problems ❑ None, my cat has always been healthy

Other illness / condition: _____

Does your cat require any medication or a special diet?

_____

_____

What else should we know about your cat so we may find it the *best* home?

I confirm that I have named Humane Society Silicon Valley in my will or trust, and/or as a beneficiary of my IRA, 401K, life insurance policy, donor advised fund, or other account.

Signature: **Date:**

Please make a copy of this form for yourself, and mail the original, along with a copy of the page from your will/trust where Humane Society Silicon Valley is named as a beneficiary, to:

Humane Society Silicon Valley
Attn: Lauren Conder
901 Ames Ave.
Milpitas, CA 95035

Please remember to:

- Keep your own copy of this profile with your will or trust.
- Identify two friends or family members as individuals who know that they are entrusted to deliver your pet(s) to HSSV in case of emergency.
- Notify HSSV if your pet passed away, their health changed, or if you have added new pets to your home.