



## Litter Surrender Fee Form

In order to prepare your surrendered pets for adoption, they will be microchipped, vaccinated, spayed or neutered, tested for leukemia, FIV, and heartworm for dogs while at the shelter.

---

Our adoption fee does not cover costs of readying animals to be adopted. These are the average costs of preparing our animals for adoption:

**Male dog: \$184**  
**Female dog: \$201**  
**Male cat: \$140**  
**Female cat \$155**

We require a \$15 fee for each animal surrendered as a part of a litter. However, we encourage you to donate more:

- I am agreeing to pay the \$15 fee per animal in order to surrender my pets
- I wish to donate more than the required \$15 fee per animal and will be donating \_\_\_\_\_ in addition to the surrender fee.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff: \_\_\_\_\_ Date: \_\_\_\_\_

---

**Butte Humane Society (BHS) is a low-kill facility and therefore may euthanize this animal if found to be unadoptable by behavioral or medical staff. BHS strives to find other options to euthanasia when appropriate. BHS reserves the right to euthanize this animal without contacting the finder. Answering the following questions may help BHS care for this animal.**

Would you be willing/able to provide care for this animal if BHS determines the animal to be unadoptable? Yes  No

Butte Humane Society  
Litter Surrender Form

Birth date/Age \_\_\_\_\_  
 Are they housebroken? \_\_\_\_\_  
 Have they had any vaccines? \_\_\_\_\_  
 Mother's breed \_\_\_\_\_  
 Mother's personality \_\_\_\_\_  
 Date of mother's last vaccination \_\_\_\_\_ Where? \_\_\_\_\_  
 Father's breed \_\_\_\_\_  
 Father's personality \_\_\_\_\_  
 Do the parents have any behavior problems or health concerns? \_\_\_\_\_

	Sex	Color	Name
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

I, undersigned, owner or having control of the animals described above, hereby give ownership of said animals to the Butte Humane Society to be placed for adoption or humanely euthanized, at the discretion of the Society. I assume all responsibility for damages caused during my ownership of said animals. I agree to make all veterinarian records for said animals available to the Society and adopter of said animals.

\_\_\_\_ (Please initial) I certify that, to my knowledge, these animals have not bitten or scratched anyone in the past fourteen days or been exposed to rabies.

\_\_\_\_ (Please initial) I understand and agree that the Society reserves the right to either place for adoption or humanely euthanize these animals.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone \_\_\_\_\_ Alternate phone \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE - STAFF ONLY**

\_\_\_\_\_  
 Butte Humane Society Representative                      Date

Notes: \_\_\_\_\_

**OR Counseling:**  Not Needed  Dogs  Cats  Bite history  Behavioral  
 Other \_\_\_\_\_