



Cat Guardians: registration form

About you

| | | | |
|---|--------------------------|---------------|--------------------------|
| Title | <input type="text"/> | First Name | <input type="text"/> |
| | | Surname | <input type="text"/> |
| Address | <input type="text"/> | | |
| | <input type="text"/> | Postcode | <input type="text"/> |
| Phone number | <input type="text"/> | | |
| Email | <input type="text"/> | | |
| Supporter number (if-known) | <input type="text"/> | Date of birth | <input type="text"/> |
| Is Cats Protection your first choice to care for your cat(s) or are we a back up if friends and family are unable to support? | | | |
| First choice | <input type="checkbox"/> | Back up | <input type="checkbox"/> |
| Date you have completed this form: | <input type="text"/> | | |

Your partner's details (if relevant)

| | | | |
|--|----------------------|------------|----------------------|
| Title | <input type="text"/> | First Name | <input type="text"/> |
| | | Surname | <input type="text"/> |
| Yes, my partner has agreed for their details to be shared <input type="checkbox"/> | | | |
| Same address as above <input type="checkbox"/> or fill in below | | | |
| Address | <input type="text"/> | | |
| | <input type="text"/> | Postcode | <input type="text"/> |

About your cat(s)

In the event of your death the following information will help us keep our promise to find your cat(s) a loving new home that will match their individual needs and requirements, no matter how long it takes. If you have more than three cats, or if you have a hybrid or Bengal breed of cat, please call us on **01825 741 291** to discuss arrangements and request a continuation form.

1st cat

Name

Sex: Male

Female

Age

Description

Is your cat: Neutered?

Yes

No

Vaccinated?

Yes

No

Microchipped?

Yes

No

Microchip number

Any special dietary/veterinary needs

Do you own this cat?

Yes

Please note we can only register owned cats

Likes

Dislikes

Anything else

2nd cat

Name

Sex: Male

Female

Age

Description

Is your cat: Neutered?

Yes

No

Vaccinated?

Yes

No

Microchipped?

Yes

No

Microchip number

Any special dietary/veterinary needs

Do you own this cat?

Yes

Please note we can only register owned cats

Likes

Dislikes

Anything else

3rd cat

| | | | | | | | | |
|--------------------------------------|----------------------|--------------------------|---|--------------------------|--------------------------|--------------------------|----|--------------------------|
| Name | <input type="text"/> | Sex: Male | <input type="checkbox"/> | Female | <input type="checkbox"/> | | | |
| Age | <input type="text"/> | Description | <input type="text"/> | | | | | |
| Is your cat: Neutered? Yes | | <input type="checkbox"/> | No | <input type="checkbox"/> | Vaccinated? Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Microchipped? Yes | | <input type="checkbox"/> | No | <input type="checkbox"/> | Microchip number | <input type="text"/> | | |
| Any special dietary/veterinary needs | | <input type="text"/> | | | | | | |
| Do you own this cat? Yes | | <input type="checkbox"/> | Please note we can only register owned cats | | | | | |
| Likes | <input type="text"/> | | | | | | | |
| Dislikes | <input type="text"/> | | | | | | | |
| Anything else | <input type="text"/> | | | | | | | |

About your vet

| | | | |
|----------------------|----------------------|----------------------|--|
| Name of vet | <input type="text"/> | | |
| Address | <input type="text"/> | | |
| <input type="text"/> | Postcode | <input type="text"/> | |
| Phone number | <input type="text"/> | | |

Please return this form to: **Freepost Plus RUGE-ETLA-BCCJ, United Kingdom Cat Centre, Chelwood Gate, Haywards Heath, East Sussex, RH17 7TT** and we'll be in touch shortly. **No stamp required.**

Help us make a better life for even more cats

Almost half the cats we help are cared for thanks to the kindness of people who remember us in their Will. We'd be very grateful if you could tick the appropriate box below:

- ☐ I have already remembered Cats Protection in my Will
- ☐ I intend to include Cats Protection in my Will
- ☐ I would prefer not to say what my intentions are
- ☐ Please send me more information on leaving Cats Protection a gift in my Will

We'd love to keep in touch with you

Thank you for providing the information we need for your Cat Guardians registration.

We'd love to keep in touch, by telling you about our work with cats, inviting you to support fundraising appeals, join events, campaigns or to volunteer. Rest assured, we'll never swap or sell any details about you with other organisations. We will also process your data for administrative purposes and to contact you about your enquiry.

☐

If you are happy for us to contact you by telephone, please tick this box

☐

If you are happy for us to contact you by email, please tick this box

☐

If you would prefer us **not** to contact you by post, please tick this box

Please visit **cats.org.uk/terms-privacy** if you have any questions about how we use your data.

If you have any queries please contact our Supporter Services team on:

0800 917 2287 or email: **supporter.services@cats.org.uk**

G25REGWDFM

Cats Protection is a registered charity 203644 (England and Wales), SC037711 (Scotland) and is listed as a Section 167 institution by the Charity Commission of Northern Ireland. | G25REGWS01XXXX | LEG_2166