APPLICATION FOR CAT ADOPTION



Ар	plicant name:							
Ad	dress:							
	y, State:ZIP:							
Но	me phone:Work phone:							
Но	me e-mail:Work e-mail:							
Em	ployer:Occupation:	Occupation:						
1.	What type of cat are you interested in?							
	□ Male □ Female □ Kitten (under 5 months) □ Adult □ Long Hair □ Short H	air						
	Name of cat you are interested in:							
	Personality type:Color:							
2	How many people currently reside in your household?							
	Any children in the household? Yes No List ages:							
	. For whom are you adopting the cat? \Box Self \Box Gift							
J.	Does any member of the family have any allergies to animals? Yes No If yes, explain:							
6.	. Who will be responsible for the cat's care?							
7.	. Where do you live? 🗅 Apartment 🗅 Condo 🗅 Farm 🗅 Mobile home 🗅 Townhouse 🗅 House							
8.	. Do you own or rent your residence? Own Rent If you rent, what is name of landlord and phone number?							
9.	Are companion animals allowed? 🗆 Yes 🗀 No 🗀 Not sure							
10.	Where will the cat be kept? 🗅 Indoors only 🗅 Outdoors only 🗅 Both in/out							
11.	If outdoors, will the cat be \Box attended \Box unattended \Box collar & tags?							
12.	Will anyone be home during the day? 🗅 Yes 🕒 No							
13.	How many hours will the cat be left unattended?							
14.	When no one is home, where will the cat be kept?							
15.	If you move, what will you do with the cat?							
16.	How far from the road/traffic is your home/farm located?							
17.	Is the volume of traffic 🗅 light 🗅 moderate 🕒 heavy?							
18.	Have you ever had a companion animal before? 🗖 Yes 📮 No							

19. Describe those companion animals you still care for or that are living in your household.

Name	Breed	Age	Neutered?	Kept where	Time in your care	

20. Describe those companion animals you no longer care for:

Name	Breed	Age	Neutered?	Kept where	Time in your care	Reason no longer with you

21. Are your companion animals current on their vaccinations?
Yes No

22. Please provide name of your veterinarian:

23. Please provide telephone number of your veterinarian: _____

24. Are you financially able and willing to provide annual checkups, vaccinations, and ANY medical care necessary? 🗆 Yes 🗅 No

25. If you have a dog, is he/she permitted to run loose? \Box Yes \Box No

26. What precautions would you take to properly introduce a new cat into your home if you have other animals (a dog, bird, rabbit, another cat, etc.)? ______

27. What will you do if your new cat does not get along with your present companion animals?

28. Are you planning on declawing? Yes No Not sure

29. Have you ever adopted an animal from a rescue/animal control agency?
Yes
No

30. Have you ever had an application rejected for adoption of an animal from a rescue/animal control facility? 🗅 Yes 🗅 No If yes, explain: _____

31. Why do you want to adopt a cat?_____

32. If a disciplinary or behavior problem arises, what steps will you take to work on it?

33. Are you familiar with your local animal control laws?
Yes No

34. Are you willing to sign legal pet adoption papers?
Yes No

35. Do you agree to permit a visit to your home/farm by appointment? \Box Yes \Box No

By signing this form, I/we acknowledge that all information on this form is true and correct. I/we understand that any misrepresentation of fact may result in ______ refusing adoption privileges to me/us. If my/our request for adoption is approved and later ______ discovers the above information is not true or correct, ______ reserves the right to remove the adopted cat from my home/ farm.



References

Please provide 3 references with contact information below:

I .		
2.		
3.		