

ADOPTION APPLICATION

Applicant name(s):	
Driver's license #(s):	
Address:	
	Home Work Cell (please circle one)
	Home Work Cell (please circle one)
E-mail address(es):	
Employer:	How long?:
•	Female ☐ Kitten (under 5 months) ☐ Adult ☐ Long Hair
☐ Short Hair ☐ Other:	
Personality type:	Color:
Name of cat you are interested in:	
2. How many people currently reside in your househo	ld?
3. Any children in the household? \square Yes \square No List ag	es:
4. For whom are you adopting the cat? \square Self \square Gift	
5. Does any member of your household have any alle	rgies to cats? ☐ Yes ☐ No
If yes, explain:	
6. Who will be responsible for the cat's care?	
7. Where do you live? \square Apartment \square Condo \square Farm	n 🖵 Mobile home 🖵 Townhouse 🖵 House
8. Do you own or rent your residence? \square Own \square Ren	t
If you rent, please provide name and phone number	r of landlord:
If you rent, may we contact your landlord as part of	our background check?
9. Are companion animals allowed in your home? \square	'es ☐ No ☐ Not sure
10. Where will the cat be kept? \square Indoors only \square Ou	tdoors only 🖵 Both in/out
If cat will be allowed outdoors, will he/she \Box be at	ended 🖵 be unattended 🖵 wear collar & tags?
If allowed outdoors, how far from the road/traffic is	s your home located?
Is the volume of traffic \square light \square moderate \square heav	y?
11. When no one is home, where will the cat be kept?	
12. If you move, what will you do with the cat?	
does not include any medical emergencies that may a	0- $$600$ per year in food, litter, and basic medical care. This rise. Are you financially able and willing to incur this cost for edical care which may become necessary? \Box Yes \Box No
14. Are you planning on declawing? ☐ Yes ☐ No ☐ No	ot sure
15. Have you ever had a companion animal before?	l Yes □ No



16. Describe the companion animals that are currently living in your home:

<u>Name</u>	Type/Breed	<u>Age</u>	Spayed/ Neutered	Time in your care
	pets kept?			
Are all of your companio	n animals current on their vaccina	tions? 🗆 Yes 🗅	No If no, explain	n:
What precautions will yo	ou take to introduce a new cat into	your home?		
What will you do if your	new cat does not get along with y	our present com	panion animals?	
17. Describe those compar	nion animals you no longer care fo	r:		
 Time in vour care:	Reason no longer w	ith vou:		
	nd phone number of your veterina			
May we contact your vet	terinarian as part of our backgrour	nd check? 🗖 Yes		
19. Have you ever had an a	pplication rejected for adoption of	f an animal from	a rescue/animal	control facility?
☐ Yes ☐ No If yes, explain:				
20. Why do you want to add	opt a cat?			
21. If a disciplinary or behave	vior problem arises with a new cat	, what steps will	you take to work	on it?
 22. Are you familiar with yo	our local animal control laws? 🖵 Yo	es 🗆 No		
23. Are you willing to sign le	egal pet adoption papers and/or a	contract? 🗖 Yes	s □ No	
24. Do you agree to permit	a visit to your home/farm by appo	ointment? 🗖 Yes	☐ No	
25. Are you willing and able	e to pay our pet adoption fee (curr	ently \$95 per cat	t)? 🗆 Yes 🗅 No	
understand that any misrep for adoption is approved bu	I/we acknowledge that all informa presentation of fact may result in but it it is later discovered that the abur remove the adopted cat from my	oeing refused ado	option privileges.	If my/our request
Please print name(s)				
Signature(s)				