

Thank you for considering one of our kittens to add to your family. We are very selective about the placement of our cats/kittens and would like to get to know our prospective families a bit before placing one of our cats/kittens into their new homes. Please fill out this application and send it back to be considered as one of our extended family members.

Our email address is <a href="mailto:sassycatz023@gmail.com">sassycatz023@gmail.com</a>

| Address:           |   |   |
|--------------------|---|---|
|                    |   | s:  |
|                    | Best time to contact you                        | AM / PM                                   |
| Do you own or      | rent your home/apartment: Rent / Own / Ot       | her – describe                            |
|                    | If you rent, do you have the landlord's p       | permission to keep a cat: Yes / No        |
|                    | (Landlords permission must be o                 | btained to be considered)                 |
|                    | How long have you lived at this addre           | ss: years months                          |
| How mar            | ny adults in the household:How i                | many children in the household:           |
| Age and            | gender of children:                             |   |
| lf <sup>,</sup>    | you have young children, do they practice the   | proper handling of cats/kittens: Yes / No |
|                    | Are any members of your household               | d allergic to animals: Yes / No           |
| yes, please list y | our plans to manage this:                       |   |
|                    |   |   |
|                    | Do you have a regula                            | r vet: Yes / No                           |
|                    |   |   |
|                    | hold will have the main responsibility of carin | g for this cat/kitten:                    |
| here will the ca   | t/kitten sleep/be kept:                         |   |
|                    | (Cats Must Be Kept indoor                       | rs unless on a leash)                     |

Have you ever owned a cat/kitten before: Yes / No

| Do you have other animals: Yes / No   |  |
|---|--|
| If yes, please list:  |  |
| If yes, are they spayed/Neutered: Yes / No  |  |
| Have you ever rehomed/given away/surrendered an   | animal: Yes / No   |
| If yes, please describe circumstances:  |  |
| If you have to move or need to travel, what will you  | do with your cat/kitten:   |
| If you are no longer able to care for your cat/kitten, oplans be for your cat/kitten:   | due to your living arrangements / health, etc., what would your  |
| What are your views on declawing:   |  |
| Why did you choose a Maine Coon for your preferred  | d cat/kitten:  |
|   |  |
|   |  |
| Are you interested in: Male / Female  |  |
| What is your color preference:  |  |
| on their growth/development. They will come with a Once you are approved and put on our wait list, we we have a confirmed mating. We will start taking de the balance to be paid by cash at time of pick up. If y | ome to their forever families at the age of 12-16 weeks, depending a carrier, toys, small bag of food, micro-chipped and TICA registered will keep you updated on the progress of your expected kitten once posits at 4 weeks of age — the non-refundable deposit is \$500 with you have to arrange for transport, you will need to pay by cashiers in hand 2 weeks before the day of pickup. If for some reason you it over to our next litter. |
| Our pick up days are Saturday and Sunday only.  |  |
| We currently do not offer kittens with breeding right cattery.  | its unless we have an established relationship with you and your   |
| Applicant signature:  | Date:  |