

HUMANE SOCIETY OF PREBLE COUNTY, INC.  
P.O. BOX 72 EATON, OHIO 45320

CAT ADOPTION APPLICATION

Note: This is a legal contract – please read carefully

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Employer \_\_\_\_\_ How Long? \_\_\_\_\_

1. I am interested in adopting: \_\_\_\_\_ Kitten \_\_\_\_\_ Cat

2. I have previously adopted from this shelter: \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, when? \_\_\_\_\_

3. My family consists of: \_\_\_\_\_ # of adults \_\_\_\_\_ # of children Ages of children: \_\_\_\_\_

4. I presently own: \_\_\_\_\_ # of dogs \_\_\_\_\_ # of cats Are they spayed/neutered? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are they current on vaccinations? \_\_\_\_\_ Yes \_\_\_\_\_ No Where do they sleep? \_\_\_\_\_ Inside \_\_\_\_\_ Outside

5. Your veterinarian's name and phone number: \_\_\_\_\_

6. Do you [ ] own [ ] rent [ ] land contract? Apartment \_\_\_\_\_ House \_\_\_\_\_ How long have you lived here? \_\_\_\_\_

7. If you rent, please provide your landlord's name and phone # \_\_\_\_\_

8. My pet will be kept: \_\_\_\_\_ Inside \_\_\_\_\_ Outside \_\_\_\_\_ Both

My pet will sleep: \_\_\_\_\_ Inside \_\_\_\_\_ Outside

9. Will you get your new pet spayed or neutered? [ ] Yes [ ] No

10. Do you understand that there may be adjustment period? [ ] Yes [ ] No

Are you willing to give the pet time to adjust? (Some problems may be scratching, inappropriate elimination, chewing, eating plants and clawing furniture) [ ] Yes [ ] No

11. If you have children, are you willing to teach them how to handle the pet properly? [ ] Yes [ ] No

12. Are you willing to take responsibility for this pet for the next 10-15 years or longer? [ ] Yes [ ] No

13. Do you understand the financial responsibilities that come with owning a pet? [ ] Yes [ ] No

I agree to properly house, feed and provide veterinarian care for this pet. I will exercise control and restraint with respect to this pet at all times, will not allow it to run free, and will insure it does not become a nuisance to other persons or property. [ ] Yes [ ] No

I agree to promptly spay/neuter this pet. I agree to do this within one month of adopting this pet, if this pet is an adult. If this pet is not an adult, I agree to spay/neuter this pet by the time this pet is six months old. [ ] Yes [ ] No

I agree that this pet shall not be used for medical research, shall not be bred, shall not be abused, neglected or abandoned. [ ] Yes [ ] No

If adopter at any time can no longer care for the animal, adopter agrees to adopt it to another responsible person or return the animal to the Humane Society of Preble County, Inc. [ ] Yes [ ] No

I understand the adoption of any animal is a commitment on my part to care for him/her for a lifetime. This will include financial and time obligations that I feel I can fulfill. [ ] Yes [ ] No

**Adopter is fully aware that the Humane Society of Preble County, Inc. makes no guarantee whatsoever to the health, temperament and training of the animal.** [ ] Yes [ ] No

**The Humane Society of Preble County, Inc. reserves the right to refuse any adoption for any reason.**

By signing my name below, I acknowledge that I have completely read this questionnaire and that I understand and accept the terms of this Adoption Application. I understand that applying does not ensure approval, and that untruthful answers or failure to comply with the terms and requirements of this application or the Adoption Contract can result in the forfeiture of any animal adopted by me. I hereby release the Humane Society of Preble County, Inc. from any and all claims and/or liability.

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

Driver's License Number \_\_\_\_\_

Shelter Employee: \_\_\_\_\_

Adoption approved [ ] Yes [ ] No

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_