

## **CAT/KITTEN ADOPTION APPLICATION**

To ensure a good home/pet match, we ask that you complete the following questions in full. Your information will be kept confidential and not used for any purpose other than consideration for this adoption.

Your email address:	
Your Name:	DOB:
Street Address:	
	Zip:
Your Occupation:	
Spouse/Partner Name:	
Their Occupation:	
Home Phone: Cell Phone	
Why would you like to adopt a pet?	
Are you adoptiong for yourself or for someone else?	
Do you rent or own your home?	Live with parents?
If you rent, do your have your landlord's permission to have a pet on pre	mise?
Landlord's Name	Phone:
Is everyone in your home in agreement about adopting this cat or ki	itten? YES NO
Do you have plans to move? YES NO How long a	at current address?
What would happen to your pet if you needed to move?	
Do you have children? YES NO How many?	Ages?
What would happen to the cat if you had more children?	
Does anyone in your home suffer from allergies? YES NO	
If yes, please provide details:	

	Clawing Furniture		Moving						
	Litter Box Problems			Difficulty Adjusting to Existing or Future Pet					
	Jumping on Countertops		Arrival of New Baby						
	Unknown Allergies	_	Other:						
Do you cu	rrently have any (oth	er) pets? If yes, p	lease detai	l below:					
TYPE	AGE	BREED	SPAYED/I	NEUTERED	CURRENT	VACCINES	OWNED FOR HOW LONG?		
			YES	NO	YES	NO			
			YES	NO	YES	NO			
			YES	NO	YES	NO			
			YES	NO	YES	NO			
Do you c	urrently have a famil	y veterinarian?	YES	NO					
Name:	:			_ c	linic Name:			_	
Phone:				_					
Wil	I this cat live:	Inside Only		Inside/Ou	tside		Outside Only		
How long	do you aniticipate it	will take for the p	et to adjus	t to your ho	me?				
Who will	care for your pets if y	ou travel?						_	
Do you in	tend to declaw your o	cat? YES	NO	Would yo	u consider a	alternatives?	YES NO		
If ap	pplying for a specific p	oet, please provid	le it's name	::					
I acknowle best of my	edge that the above i y ability.	information is tru	e and corre	ct and have	answered (	all questions	honestly and to the		
Signature	of Applicant:					Date:			

What would be a good reason to give up your pet? (Check all that apply)