



Adoption Application

YOUR CONTACT INFORMATION:

First Name Last Name

Address

City/State Zipcode

Phone Email

Place of Employment: Work Phone:

Are you 18 years of age or older? Yes No

YOUR HOME:

What type of housing do you live in?

Apartment House Others, _____

Do you rent this property? If yes, fill the landlord name and contact info in the box:

No Yes

Have you previously owned pets? No Yes

Please list any animals you have currently or have had in the past five years

Purrfection Animal Rescue is a non profit organization located in Galena, IL 61036

Phone: (815) 821-1420

Email: purrfectionanimalrescue@gmail.com

Resale store address: 605 Ridge Street, Galena, IL 61036- Stop out and see us! All proceeds are donated to the rescue.

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YOUR HOME:

Describe the Activity in your home:

Busy/Noisy

Moderate
Coming/Goings

Quiet with Occasional Guests

Please list all the people living in your home (Name, Relationship and Age):

Does anyone in your home have allergies to animals?

Yes

No

Are you willing to have a representative of Purrfection make a home visit?

Yes

No

Would you be willing to have a Purrfection Team Member call your veterinarian:

Yes

No

Please Provide Contact Information for your veterinarian:

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If you move, what will happen to your pet?

Who will feed/train/care for you pet?

Have you ever returned/surrendered a cat for any reason? If so, please list the reason below"

Yes No

Please provide 3 personal references for contact. Please do not use any immediate family members (i.e. mother, father, sister, brother).

References:

First Name Last Name

Phone

First Name Last Name

Phone

First Name Last Name

Phone

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