

Date:	

Thank you very much for taking the time to complete this application. Please answer every question and give as much detail as possible, providing phone numbers and appropriate contact persons. The applicant must be between the ages of 24 and 89 to adopt. Completion of the application does not guarantee adoption. Cats are adopted to the person and home environment that presents the best match for the cats.

The Foster and Adoption Program in Laguna Woods Village is supported by donations and a variety of fund raisers; it is not for profit. All our cats have been spayed/neutered and have current vaccinations. If there is any health concern they have been examined by a veterinarian. They are fostered in our homes.

Name: Age:	Phone:			
Address:	Cell Phone:			
	Email:			
How long have you lived at this address?	Do you own?			
Name of Spouse/Partner: Age:	Work Phone:			
Do you live in an apartment/townhouse? () Mobile home? ()	Single family home? ()			
Do you need the permission of a landlord before bringing home a new pet? Yes () No ()				
Name and phone # of landlord:				
What rules does your landlord or HOA have regarding pets?				
Do you have any of the following: Patio/Balcony () Pet Door () Damaged Screens/Windows ()				
Other means for a cat to access the outside? Yes () No ()				
Please explain:				
Children's ages who live in the home:				
Does anyone currently or planning to live in the home suffer from allergies or asthma? Yes () No ()				
Does anyone else live in the home? Yes () No () Ages and relation:				
Name:	Age:			
Who will be responsible for the cat's care (feeding, cleaning litter, taking to the vet):				



Laguna Woods Cat Club ~ Adoption Application and Agreement

Name of your vet:	Phone #:		
Why do you want to adopt a cat?			
How often will litter box be cleaned?			
How many hours a day on average will the cat be left alone?			
What are your plans for the cat when you travel?			
Tell us about any current pets that live in or visit the home?			
Have these pets been tested for FIV (Feline AIDS) and FELV (Feline Le	ukemia)? Yes() No()		
Have these pets been vaccinated for FVRCP and rabies? Yes () No	()		
Tell us about your past pets and why they are not currently with you?			
Have you ever had to give up a cat for any reason in the past? Yes ()	No ()		
What behaviors are unacceptable from a cat that would warrant giving the	ne cat up?		
Annual food supply and animal care on average runs approx. \$1000-\$1500. Are you willing and able to			
manage that? Yes () No ()			



Please initial:				
I am prepared to commit to giving this cat a home for the rest of his/her life. I understand that cats can live up to 20 years.				
I understand and am prepared to provide the financial assistance necessary to care for this cat.				
I understan	I this cat will be an indoor cat and must not be allowed outside.			
Emergency	contact information and agreement:			
I agree to assun	e custody or take responsibility for the care of this cat/cats, in the event that			
the adopter is no	longer able to do so, until permanent arrangements can be made.			
Emergency conf	ct name: Relationship:			
Address:				
	(Cell)			
Email:				
Signature:				
Adopter's Name:	Signature:			
Cat's Name:	Age:			
Please contact Patric	a Moss at <u>pmosscats@gmail.com</u> , or call Patricia at 949-290-3406			
	Please mail this application to:			
	Patricia Moss			
	219-A Avenida Majorca			
	Laguna Woods, CA 92637			
For office use only	Revised 09/26/2025			
Annroyed Ry:	Date:			