

FELINE

Adoption Application

Adopting a pet is a lifetime commitment. Cats can live an average of 13 to 20 years.

Animal	Name	Today's Date								
Last Nai	me:	First	Name:							
Address:			City:		State/Zip:					
Primary	Phone:	Secondary Phone:			Email:					
I verify t	hat I am 25 years of	age or older: Initial Here								
1. 2. 3. 4.	Do you: Own R	House Condo Apartment ent Live with Parents/Relative d or Homeowner's Name and Ph	es Live with Fri none Number:	ends	2B. Length o	f Residency:				
	, people			021 1 100						
Name		Phone Number	Allergic to	Allergic	Over 18	Age if younger	ger Live there full time?			
			Dogs?	to Cats?	years old?	than 18.	Y			
			YN	YN				N		
			Y N	Y N				N		
			Y N	Y N			Y	N		
 8. Do you plan on having this cat/kitten declawed? Y N Undecided 9. Will this cat be allowed outside? Y N 9a. Where outside?										
	c. Move?									
	d. Go on vacation?									
15.	15. What will you do if your cat stops using the litterbox?									
16.	L6. What will you do if your cat bites or scratches a family member or friend?									
17. What will you do if your cat starts scratching unwanted areas like furniture or carpet?										
18.	What will you do if	your cat's behavior suddenly cha	anges (lack of ap	petite, letha	rgy, etc.)?					
19.	Do you agree to pre	e-adoption and post-adoption fo	llow up calls, e-n	nails and/or	home checks	? Y N				
20.	Do you have now, o	or did you have in the last 5 years	s, other pets?	Y N 2	21. If yes, plea	ase list below:				

Have Now?		Species		Name	Breed	Age	Sex		Fixed		Declawed		Up to Date on Shots?	
Υ	N	Cat	Dog				М	F	Υ	N	Υ	N	Υ	N
Υ	N	Cat	Dog				М	F	Υ	N	Υ	N	Υ	N
Υ	N	Cat	Dog				М	F	Υ	N	Υ	N	Υ	N
Υ	N	Cat	Dog				М	F	Υ	N	Υ	N	Υ	N
22. For the note no longer in your care, where are they now and what hannoned to them?														

22. For the pets no longer in your care, where are they now and what happened to them?

23.	23. Have you ever surrendered an animal to a shelter or rescue? Y N 24. Which one?										
25.	25. What were the circumstances?										
26.	6. Do you have now, or did you have recently, a veterinarian? Y N										
27.	7. Vet's Name & Phone Number:										
28.	28. If you don't have a vet reference, please list 2 personal references that can describe your experience with pets.										
	Name	Relation to you									
	Name	Phone Number		Relation t	o you						
29.	How did you hear about us?	•		•	Returning Customer						
info fals	I certify that all of the above information is true. I hereby authorize release/disclosure of any records and/or other pertinent information including employment verification, proof of tenancy and veterinary/personal references. I understand that any false information given on this application will automatically disqualify me from adopting a pet at this rescue. The rescue reserves the right to deny any application it deems unsatisfactory.										
Sigr	nature			_ Date							
	derstand that I will only hear lications.	back from the Rescue if I an	n approved. Due to	high volume, we c	do not respond to denied						
Initi	al	Date		_							
Exti	ra Notes:										