



## CAT ADOPTION APPLICATION

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Primary caregiver of this cat? \_\_\_\_\_

Reason for wanting a cat?  Companion  Mouser  For children  Gift  Breeding

My veterinarian is: \_\_\_\_\_ Location: \_\_\_\_\_

Do you plan to move or go on vacation soon? \_\_\_\_\_ If yes, when and where? \_\_\_\_\_

Will your cat stay:  Indoors only  Outdoors only  Indoors and outdoors

If outdoors, how long after adoption would you start allowing your cat to go out? \_\_\_\_\_

Where will your cat spend the night? \_\_\_\_\_

If my cat is not using the litter pan, I will: \_\_\_\_\_

I live in a:  House  Condo  Apartment  Mobile home  Rent \_\_\_\_\_

I live with:  Alone/age: \_\_\_\_\_  Spouse/age: \_\_\_\_\_  Parent/age: \_\_\_\_\_

Roommate(s)/ages: \_\_\_\_\_  Children/ages: \_\_\_\_\_ Other/age: \_\_\_\_\_

Please list all the pets you've had in the past five years:

| Breed | Age | Sex | Spayed or neutered? | #Years Owned? | Still Live With You? | If not, why? |
|-------|-----|-----|---------------------|---------------|----------------------|--------------|
|       |     |     |                     |               |                      |              |
|       |     |     |                     |               |                      |              |
|       |     |     |                     |               |                      |              |

**Please read and sign:** Many factors determine which applicant will be matched with a particular pet. If you are not able to adopt a pet today, it does not mean that you are not considered a good pet owner or that your home is not acceptable. Our goal is to place all animals into homes that will best suit their individual needs. Please ask for clarification if you have any questions.

I would like to purchase a flea treatment for my cat for an additional \$15 **YES**  **NO**

I have completed this application truthfully and fully understand the adoption process.

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

**FOR STAFF USE:**

Adoption counselor: \_\_\_\_\_

Adopter is interested in: \_\_\_\_\_ Pet ID#: \_\_\_\_\_ Pet K#: \_\_\_\_\_

Cat restrictions: \_\_\_\_\_ Spoke to: \_\_\_\_\_

Discussion topics: \_\_\_\_\_

Approved: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_