

**CAT ADOPTION APPLICATION**

Thank you for your interest in providing our shelter animals another chance at a permanent, loving home! In order to help us make the best possible fit between you and a new pet, please complete the information below.

**PLEASE PRINT CLEARLY – YOU MUST BE 18 YEARS OR OLDER**

Name			Home Phone		
Physical Address		City/State	Zip		Cell Phone
Mailing					Work Phone
Drivers License / ID Number	Expiration	Time At Current Residence:		Yrs.	Mos.
					Email Address

**GENERAL INFORMATION**

Do all the adults in your household know that you plan to adopt a cat? Yes No  
*Are there any household objections?* Yes No  
 Does anyone in your household have any allergies to animals? Yes No  
*If Yes, can/will the allergies be controlled by medication?* Yes No

Who will be the cat's primary care taker (i.e. feed, train, exercise, groom, etc.)? \_\_\_\_\_

Are you aware of annual expenses associated with having a cat? Yes No

Are you prepared to assume the financial responsibilities of providing your cat with adequate food, medical care, housing, training, toys, etc. (at least \$1,000/year)? Yes No

Are you prepared to commit a life-long relationship with this cat? Yes No

Please describe your feelings about spaying or neutering domestic animals? \_\_\_\_\_  
 Have you ever brought an animal to a shelter? \_\_\_\_\_ If yes, describe circumstances? \_\_\_\_\_

Do you plan to declaw the cat? \_\_\_\_ If yes, why? \_\_\_\_\_  
 If this cat starts having litter box problems, what would you do? \_\_\_\_\_  
 Under what circumstances would you give up the pet, and what would you do with it? \_\_\_\_\_

Have you ever been convicted of or received citations for violation of Federal, State, or Municipal animal codes?  
 Yes No *If Yes, please explain* \_\_\_\_\_

**YOU & YOUR HOUSEHOLD – CHECK ALL THAT APPLY**

<b>Your Living Place:</b> <input type="checkbox"/> House <input type="checkbox"/> Condo <input type="checkbox"/> Apartment <input type="checkbox"/> Mobile Home <input type="checkbox"/> Other _____	<b>Do you own your home?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No, I am a renter Do you have landlord approval to adopt a (another) cat <input type="checkbox"/> Yes <input type="checkbox"/> No Landlord's Name /Ph # _____ _____ Complex Name _____ _____ <input type="checkbox"/> Live with Parents <input type="checkbox"/> Other _____	<b>Home Lifestyle:</b> <input type="checkbox"/> Very Active <input type="checkbox"/> Somewhat Active <input type="checkbox"/> Rather Quiet  <b>Veterinary Care:</b> Vet: _____ _____ Ph #: _____ _____	<b>Cat Experience:</b> <input type="checkbox"/> Never had a cat <input type="checkbox"/> Have had one or two <input type="checkbox"/> Have had many  <input type="checkbox"/> City Cat <input type="checkbox"/> Rural Cat <input type="checkbox"/> Mountain Cat
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**TURN OVER TO COMPLETE APPLICATION** ----->

