

CAT ADOPTION APPLICATION

Name:	Phone:		Date:		
Address:	City:		State:Zip:		
Email:	Who will be primary caregiver of cat?				
Reason for wanting a cat?	🗆 Mouser	□ For children	🗆 Gift	□ Breeding	
My veterinarian is: Location:					
Do you plan to move or go on vacation soon? If yes, when and where?					
I live in a: ☐ House ☐ Condo ☐	Apartment	□ Mobile home	🗆 Rent		
If you are renting, have you checked with your landlord to be sure pets are allowed and that you have a pet deposit?					
I live with: Alone/age: Spouse/age: Parent/age: Roomate(s)/Age(s),					
□ Children/age(s):, □ Other/age:					
Do you or any of the people you live with have allergies to cats? If yes, how do you plan to cope with the allergies?					
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 your cat stops using the litter pan, you will:					
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Please list all the pets you've had in the past i	CATTING THE DATA DATA DATA DATA DATA DATA DATA DAT	0.03 1			
	payed or #Ye eutered? own	The second s		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.					
Signature:			Date:		
FOR STAFF USE:					
Adoption counselor:		-			
Adopter is interested in:	Pet ID#:		Pet K#:		
Cat restrictions:					
Discussion topics:	an a				
Approved:				Time:	
Deposit received: Release 1 hour after opening:					