CAT ADOPTION APPLICATION

| Name of Cat: | Date: |
|--|---|
| Description: | Gender: Male Female |
| | the lifetime and duration of the cat's natural life, which can be 20 years, an indoor home with access to a scratching post and places to hide, d social interaction for the duration of his/her life. For this reason, I |
| ADOPTER IN | NFORMATION: |
| Adopter's Name: | |
| Adopter Address: | |
| City: State: | Zip Code: |
| Phone #: Home () Work () | |
| E-Mail Address:@ | |
| Are you 21 years of age or older? (circle one) Yes No Emplo | yer: |
| Current Veterinarian's Name: C | · · · · · · |
| Please answer ALL of the following questions. If it "does not a | oply" please indicate "N/A". Completeness IS IMPORTANT. |
| 1) Home Situation: Do you live in a (circle one) house Do you (circle one) Own Rent* How man Do you plan to move in the next 6 months? Y *If renting, have you confirmed that pets are allowed? Y N Ha | any years at this house/apartment?Yrs |
| Landlord's Name: Lan- | dlord's Phone # |
| 2) Please list below all the people your new kitty will be living with: Name Age Rela Rela | No others in home: ationship to the Adopter |
| 3) Please list below all the other pets your new kitty will be living with Name Age Altered? Y Y Y Y Y Y Y Y Y Y Y Y Y | : No others in home: |
| 4) Are there any regular visitors to your home, human or animal, with Please describe: | |

| 5) Does the whole family agree | with the adoption of a pet at this time (circle one)? Y |
|--|--|
| 6) What arrangements do you make for your pets when you go on vacation or in case of an emergency? | |
| 7) Is there any cat behavior that | t you find unacceptable? Y N If yes, please describe: |
| 8) How do you control or prever | nt displays the behavior(s) that you find unacceptable? |
| 9) Do you plan to declaw? Yes10) If you have other cats, are a | ny of them declawed? Y N Reason: |
| Pet Name: Pet Name: | their vaccinations? Y N If no, which ones are NOT and why? Reason: Reason: Reason: |
| 12) If you have other cats, have Feline Leukemia (FeLe Are any of them positive | uk) Y N Feline Immunodeficiency Virus (FIV)? Y N e for FeLeuk? Y N Are any of the positive for FIV? Y N |
| | yourself? Y N Are you adopting my cat for someone else? Y N for someone else, who is the person who will have the cat? |
| 14) Why do you want to adopt a | cat? |
| 15) Do you want my cat to be (c | ircle one): inside only outside only inside/outside don't know |
| 16) Have you ever owned a cat | before that is no longer living with you? Y N Reason cat is no longer with you: |
| 17) Have you ever given up an a | animal before? Y N If yes, please explain who the animal was given to and why: |
| 18) Describe your previous expe | erience with animals and be specific: |
| 19) Why do you want to adopt T | HIS CAT as opposed to others you have met? |
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