

# CATS IN NEED *Pet Adoption Application*



Cats in Need is a cat adoption agency, and not a “pet store,” “kennel” or “breeder.” We do not “sell” cats.

Our kitties are like family to us, and it’s important to our foster families and to our organization that each cat be matched with the right home, not just any home. Cats in Need does not discriminate on the basis of sex, race, color, religion, creed, age, national origin, ancestry, pregnancy, marital status or parental status, sexual orientation, or disability. Each individual application is considered for the best fit for the cats and the family.

By filling out this application, you understand that you are not guaranteed approval, and Cats in Need is under no obligation to accept your application.

*Your information is confidential and is for use of Cats In Need only and will not be released to any individual or company outside of Cats In Need*

## Contact Info

Your Name		Age
Address		Cell Phone
City	Zip	Home Phone
Email		
Other Members in your household. Please list relationship to you for all and age (if a child)		
You are adopting this pet for: yourself <input type="checkbox"/> spouse <input type="checkbox"/> child <input type="checkbox"/> friend/relative <input type="checkbox"/> other <input type="checkbox"/> _____		
Who will be the primary caregiver of this pet?		

## Cat Info

Name of Cat(s) applying for
Why would you like to adopt this kitty/these kitties?
Have you adopted from us before? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, name of the animal & date: _____
How did you hear of our organization? _____
Would you be interested in fostering a cat/kittens for a period of time? Yes <input type="checkbox"/> No <input type="checkbox"/>
Would you be interested in joining our team as a Cats in Need volunteer? Yes <input type="checkbox"/> No <input type="checkbox"/>

## About You & Your Home

Do you live in a: House  Condo  Apartment  Other  \_\_\_\_\_

How long have you lived there? \_\_\_\_\_ Do you rent? Yes  No

If you RENT: Does your rental agreement allow for pets? Yes  No  If yes, how many? \_\_\_\_\_

Does your Landlord require that cats be declawed? Yes  No

May we contact your Landlord? Yes  No

Landlord's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Cats in Need may request a home visit before approving an adoption application. Would you object to one of our team stopping by for a short visit? Yes  No

Out of 100%, estimated percent of time pet will be: Indoors \_\_\_ Outdoors \_\_\_ Both \_\_\_ Garage \_\_\_

If outdoors for any portion of time, will the pet be outdoors at night? Yes  No

Is your yard fenced/walled? Yes  No  No Yard  How high is the fence? \_\_\_\_\_

Do you have a pool? Yes  No  Is your pool fenced in? Yes  No

Where will the animal be kept while everyone is gone from the home? \_\_\_\_\_

Do you have a doggy door or cat door? Yes  No  If Yes, where does it lead? \_\_\_\_\_

On the first night in the home, where will the cat stay? \_\_\_\_\_

Generally, how many hours per day will the pet be left alone? \_\_\_\_\_

Where will the pet sleep? \_\_\_\_\_ Where will you keep the litter box? \_\_\_\_\_

Do you plan to put an I.D. tag on this pet? ? Yes  No

How will the pet be cared for when you are out-of-town? \_\_\_\_\_

Are you planning to move within the next 6 mos.? Yes  No  If Yes, where? \_\_\_\_\_

What will happen to your cat if you move during its lifetime? \_\_\_\_\_

If you have a new baby, what will you do in regards to any pet you have? \_\_\_\_\_

What have you been told about pregnancy and cats? \_\_\_\_\_

Do you plan to declaw your cat? Yes  No  Explain: \_\_\_\_\_

The average cat can live 20-22 years. A lot can happen in this time. Under what circumstances would you not be able to keep this pet? (i.e. divorce, pregnancy, moving out of the state, moving out of the country, etc.-- think ahead for the next 15 or more years)

## Your Animal Family History

What other pets do you currently own? # of Dogs \_\_\_\_\_ Ages \_\_\_\_\_ Fixed? Yes  No

# of Cats \_\_\_\_\_ Ages \_\_\_\_\_ Fixed? Yes  No  Declawed? Yes  No

# of Birds \_\_\_\_\_ # of Reptiles \_\_\_\_\_ # of Rabbits \_\_\_\_\_ # of Other \_\_\_\_\_ Type \_\_\_\_\_

What other pets have you owned in the past 10 years? \_\_\_\_\_

What happened to these pets? (If deceased, please give details on circumstances)

Have you ever had to give up a pet due to allergies? Yes  No  If Yes, type of pet? \_\_\_\_\_

Does anyone in your household currently suffer from asthma or allergies? Yes  No

If Yes, is the asthma or allergy currently controlled by medication? Yes  No

Do either cats or dogs cause your allergy? Yes  No  If yes, which? \_\_\_\_\_

Has anyone in your household appeared to grow out of their asthma/allergies? Yes  No

If anyone is or becomes allergic, what will you do?

Are you aware that pets need regular vaccinations and require routine veterinary care? Yes  No

Are you able to provide adequate veterinary care if this animal becomes sick or injured? Yes  No

Are you aware of what a veterinarian may charge for a basic office visit? Yes  No

I expect an office visit to run \$ \_\_\_\_\_ - \$ \_\_\_\_\_

Are you aware of what immunizations may cost? Yes  No

I expect immunizations to run \$ \_\_\_\_\_ - \$ \_\_\_\_\_ per visit

Are you aware that a single Emergency Room vet visit can easily run \$150 to \$500 and up? Yes  No

Are you willing/prepared to shoulder this cost should the need arise? Yes  No

Please list the last 3 veterinarians utilized in the last (5) years:

1. Name of Veterinarian: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name of Veterinarian: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Name of Veterinarian: \_\_\_\_\_ Phone: \_\_\_\_\_

May we contact your vet/vets? Yes  No

Cats have been known to claw furniture, chew shoes, dig holes, climb drapes, eat plants, jump on counters, etc. How do you plan to deal with these problems? How have you dealt with them in the past?

What kind of behaviors do you feel you cannot accept?