

CAT AND KITTEN APPLICATION

Filling out this application does not guarantee any adoption

Name: _____ Maiden Name: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Home Phone: _____ Cell Phone: _____ D.O.B: ___/___/___

Do you live in: House Condo Mobile Home Parents Home Apartment Complex

Do you own or rent the residence? OWN RENT

If you rent, please provide landlord name/phone number: _____

Do you plan on moving within the next year? YES NO

List the full names of all other adults in the household: _____

Check all that apply:

Work full time Work part time Retired Work from home Someone is always home

List the ages of the children that live in the home? _____

Who will be primarily responsible for the care and supervision of the animal? _____

Why are you choosing to adopt a cat or kitten? Please check all that apply:

Companionship Playmate for current pet Family pet Mouser Breeding Barn Cat As a gift

Other (Please explain): _____

Where will this pet spend most of it's time? INDOORS OUTDOORS BOTH

On average, how much time will the new pet spend outdoors daily? _____

How will this pet be controlled if outdoors? Please check all that apply:

Never Outdoors Leash & Harness Pet Carrier Unrestrained Fenced Yard

Other (Please explain): _____

How long will the new cat be left alone on a daily basis? _____

Please list all other cats or dogs you currently own:

| Name | Cat or Dog? | Breed | Age | Indoors/Outdoors/Both |
|------|-------------|-------|-----|-----------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |

Which veterinary clinic do you currently use or plan to use? _____

Are your current pets spayed or neutered? YES NO SOME N/A
If you have pets that are not spayed or neutered, please list the reason: _____

Have you owned any other animals in the past five years? If so, please list their names, species, age, and a brief description of what happened to them: _____

Have you ever adopted from the HUMANE SOCIETY of NWPA? YES NO

Have you ever been convicted of animal cruelty or had a cruelty officer visit your home?
 YES NO If yes, please explain _____

Are you willing to take your new cat to a veterinarian for an initial exam and any necessary treatments at your own expense? YES NO UNSURE

Are you planning to have your new pet de-clawed?
 YES NO UNSURE ALREADY DONE

Are you prepared to be financially responsible for a pet at this time? (Average cost of food, litter and vet care per year is \$600-\$700)
 YES NO UNSURE

Is everyone in your household prepared to have a new pet at this time?
 YES NO UNSURE

Is anyone in your household allergic to cats or cat dander?
 YES NO UNSURE

Are you open to getting professional/veterinary advice if your cat has medical or behavioral problems?
 YES NO UNSURE

Explain below what methods you will use if your new cat stops using the litter box or exhibits other destructive behavior (i.e. scratching furniture, getting on countertops): _____

What sort of personality are you looking for in a feline companion (please check all that apply):
 Active & Playful Affectionate & Loving Independent Tolerant of active children/other pets
 Lap Cat Timid & Quiet Constant companion Senior companion
Other _____

What will you do if your newly adopted cat doesn't have the personality you're looking for?:
 Return to shelter Consult a vet Give to a good home Call shelter for advice Put cat outside
Other: _____

For the safety of your pets and the shelter pets, the adoption counselor must verify current pet vaccinations and proof of spay or neuter. This must be complete before you are able to view or adopt. Initial: _____