We want to make sure placements are a success for both parties so if you want to adopt a cat, please fill out this

Adoption Questionnaire

Adoption Requirements:

- You must be at least 21 years old, with proper proof of age.
- Current identification must show your correct address and phone number.
- You must be able and willing to spend the time and money needed to feed, house, train,
- and provide medical care for your pets.
- You must be willing to allow an authorized representative of the rescue group to deliver the cat to your home.

Name of cat you are interest	red in:	
If this cat is unavailable, wo	uld you be interested in another who fits	your needs? □Yes □No
Your name:		Age:
Spouse's name:		Age:
Street address:		
		Zip:
Home phone:	Alternate phor	ne:
E-mail:		
Drivers License Number:		State:
Occupation:	Years of service: Other s	sources of income:
Children's ages:	reside in your household? Adult usehold have any allergies to animals?	
	rtment	Farm Other ag at this address?
If you rent: Name of co	ommunity:	
Owner/Mana	nger name:	Phone:
Pet deposit \$	Have you paid	the pet deposit?
Suppose you move to an	apartment or rental that does not accept	t pets. What would you do with the cat?
1. What type of cat are you ☐Male ☐Female	interested in? □Adult □Kitten (under 6 months)	□Long Hair □Short Hair

Personality type:						
. Why do you want to adopt	a cat?	pet	Compa	nion for self	□Gift	Other
	□Child's	pet	Compa	nion for pet	□Barn cat	ge 1 of 3
• How many cats have you h						
• Where will your new cat be	e kept? □Indoo	rs only	□Outdoors	sonly Both	in/out	
• When alone where will the	cat stay?					
□Garage □Basement	□Outside □Or	ne room o	f house	Whole house	\Box Other	
 How would you handle the Uses the floor instead of lit Scratching furniture? Do you plan to declaw? 	tter box?					
How much money do you e						
0. Under what circumstance	s would you need	to give u	the cat? _			
 What will you feed the cat Do you have the equipment Do you have pets now? 	nt at home for the	new cat?	(litter box,	dishes, food, et	c.) \(\sigma\) Yes	□No
14. Describe the animals you	ı still care for or th	nat are liv	ing in your	household:		
Name Breed	<u>d</u>	Age	Neutered?	Kept where	Time	in your care
15. How will you acclimate y	our new cat to the	ese pets?				
16. Do your current pets spe	nd any time outsio	de? □Y	es 🗆No	Why or why not	?	

17. Are your current pets up to date on all vacc	cinations and heartworm medication? \square Yes \square No
18. Have these pets ever been around cats or k	ittens? □Yes □No
19. What will you do if your new cat does not g	get along with your present companion animal?
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We will need to call your past/o	current veterinarians office for a referral
Veterinarian:	Phone:
Pet and owners name listed under:	
If you do not have a veterina	arian, please list 3 personal references
l	Phone:
2	Phone:
3	Phone:
questionnaire to be false, we retain t	spection we find that information you have given on this the right to refuse adoption or to remove the animal without a refund of any money paid.
gnature	
ate	
If any questions are left un as our volunteers do not	rm with a PetSmart cashier nanswered, you may not be contacted t have time to track down answers.
	cial Use Only
Match approved? Reason	Completed by:

Alternatives s	uggested	_			
Contacted via		Contact	Person	Date	
Comments:					
					Page 3 of
			Officia	al Use Only	
/et Reference		enon T	Commente	Completed by:	
Contact date	Contact per	son	Comments:		
Reference C	heck			Completed by:	
Contact date		son	Comments:	, ,	
_andlord Ch	eck			Completed by:	
Contact date	Contact per	rson	Comments:	Completed by:	
Home Delive	ery			Completed by:	
Date		Notes:			
Date	Follow-up	ted via	Contact pe	Completed by:	
	,				
Comments:					

2 nd Adoption Follow-up		Completed by:		
Date	Contacted via	Contact person		
Comments:				
Official Use Only				