



ADOPTION QUESTIONNAIRE

CAT NAME _____ DATE _____

NAME _____ DATE OF BIRTH _____

ADDRESS _____ CITY _____

PHONE _____ ALT PHONE _____ EMAIL _____

VET NAME AND PHONE _____

*WE RESERVE THE RIGHT TO CALL YOUR VET PRIOR TO ADOPTION

**IF THIS FORM IS NOT FULLY COMPLETED IT WILL BE DISCARDED
FALSIFICATION WILL RESULT IN REJECTION OF THIS APPLICATION**

Why are you adopting a cat? _____

Have you ever owned a cat before? If yes, where is it now? _____

Do you currently own any pets? If so, what kind? (please indicate type of pet and age)

Are current pet(s) spayed/neutered? _____ Current on vaccines? _____

Are current pets Indoor, Outdoor or Both? _____

Will this cat be Indoor, Outdoor or Both? _____

Who do you live with? _____

How do they feel about adopting? _____

Are there children in the home? _____ Age(s) _____

Anyone with allergies? _____ Treatment _____

Do you live in a: HOUSE _____ APT _____ CONDO _____

Any restrictions on pet ownership? _____ (IF YES, WE MAY REQUEST TO SEE YOUR LEASE)

What method(s) will you use to prevent scratching (furniture, carpets, etc.)?

ARE YOU AWARE THE ANNUAL COST OF VETERINARY CARE IS \$100-200, WITHOUT SERIOUS ILLNESS? _____

Where will you keep the litterbox? _____

ALL ABOVE INFORMATION IS TRUE:

APPLICANT'S SIGNATURE _____