

DATE: _____ TIME: _____ ANIMAL NAME: _____



Adoption Application for Cats

Name:	Drivers License#				
Address:	Ci	ity:	State:	Zip:	
Home Phone:	Work:		Cell:		
Email:		Dat	e of Birth:		
You may be surprised to find t important to understand that frustrate potential adopters. E and is aimed at giving them a s help our staff help you in choo	the process is the Everything we do i second chance to	same for everyc is for the best in find a permaner	one and it is not o terest of the anir	our intent to nals in our care	
Who are you adopting this a Myself Someone residence		residence	🗆 Someone re	siding in	
<u>Residential Questions</u>					
At my current residence I:			with Parents		
If you rent: Landlord's/Paren Phone Number:					
Housing Type: □ House □	□ Condo □ Apar	tment □ Mobi	le Home □ O	ther	
How many adults live in the h Ages of children	ousehold?				
Do other children or pets visit	the home?	if so, when	?		

Do any household members have any allergies to dogs/cats?

Is your home (circle all that apply)	Active	Lively	Loud	Quiet	Calm
Other					

Employment Information

Employer:					
	umber: Years employed:				
Spouse/Partner Employer:					
Phone number:	none number: Years employed:				
<u>Veterinary Care</u>					
Veterinarian/Clinic Name			Phone number:		
Account that animals would be listed	d under at v	et/clinic:			
Are your current animals up to date	on vaccinati	ons?			
If no, why?					
<u>Circle All That Apply/Fill in</u>					
Reason for wanting a cat? Cor	nanion	Mouser	For Children	Other	
What type of cat do you prefer?	Active	Calm	Doesn't ma	atter	
I want my pet's activity level to be	: High	Medium	Low		
I want a companion that: I can t	rain M	ay need some	Requires	no training	

Our new pet will live:Indoors onlyOutdoors onlyIndoor/OutdoorGarageBarnDo you have intentions to declaw?YesNoIf yes, why?_____

Please list any pets you have had in the last 5 years (Current or Past)

Name/Breed	Dog/Cat	Age	Sex	#yrs owned	Spayed/ Neutered	Indoor/Outd oor Both	Current/Past If past, what happened

Provide at least two references (one must be non-family member)-

<u>Reference 1</u>

Reference 2

Name: (Relationship) Name: (Relationship)

Phone #

Phone #

PLEASE NOTE

I understand that completing this application does not guarantee I will be allowed to adopt an animal, and that the application is a tool to help Strayhaven Animal Shelter determine if this dog and my family are a good fit for each other. I acknowledge that all information provided on this form is true and correct. I understand that any misrepresentations may result in my not being approved and/or removal of the adopted cat from my possession. I also certify that I have never been convicted of animal cruelty or neglect.

I agree to allow a representative from Strayhaven Animal Shelter to contact my vet for a reference and also agree to allowing a home visit and/or a meet and greet with other household pets and family members prior to adopting this cat. If I am approved to adopt a cat, I agree to pay a non-refundable adoption fee and hand sign an adoption contract at the time of adoption.

I understand that all animals adopted from Strayhaven Animal Shelter will be spayed/neutered, heartworm/feline triple tested, fecal tested, vaccinated and micro-chipped prior to adoption.

I have read and understand the above, Please initial here

I/We have read and understand all the above.

Applicant's Signature:

Co-Applicant's Signature (if under 18):

Signature date:_____

*Renters: Please attach a copy of the pet section of your lease or a landlord pet permission letter.

Strayhaven Animal Shelter reserves the right to reject any application based on information obtained during this screening process. Please understand that our primary goal is the health, happiness, and safety of our rescued cats.