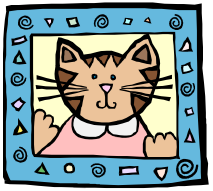


Cat Adoption Application

Cat Name _____

Humane Society of Jefferson County, Inc.



Application Procedure

We request the following information in an attempt to assist you with the selection of your companion animal. The animal's welfare is our foremost consideration. This process is designed to help us determine if the placement is in the animal's best interest and to assist you in finding an animal best suited to your lifestyle. H.S.J.C. reserves the right to refuse an adoption to anyone for any reason. No animal will be adopted to prospective owners who mislead or fail to provide accurate information on this application.

Please read the following information carefully.

1. Fill out the application completely. Identification is required to verify information.
2. We do not do same day adoptions.
3. Every effort will be made to review the application in a timely manner. HSJC staff will notify you when the process has been completed. We will contact you to inform you of our decision.
4. Once an application has been approved it will remain on file for 6 months.
5. All family members must meet the new companion animal before adoption to ensure compatibility.

Name: _____ **Phone:** _____ **Date:** _____

Birth date: _____ **Drivers License #** _____ **State Issued** _____

Address: _____

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

Email address: _____

How long have you lived at this address? _____

If there is a specific cat/kitten you are interested in? Name of cat/kitten _____

Pre-Approve (pet selection not yet made) Yes / No

Type of residence

Circle one: House Apartment Duplex Mobile Home Park Farm
 Live with friend/relative Condo Other _____

If you rent, lease or own a condo or trailer please provide the following information:

Landlord or Condo Association: _____

Daytime phone: _____ **Evening phone:** _____

Are you planning to move within the next 6 months? _____

Veterinary Information (for pets owned and previously owned)

Clinic name: _____

Phone: _____

If you do not currently have a veterinarian, you will be asked to obtain one before the adoption is finalized.

Please list all pets *in the household* and pets you have owned in the past

5 years:

<u>Species</u>	<u>Name</u>	<u>Age</u>	<u>Neutered?</u>	<u>Still own?</u>

Are the pets you now own current on vaccinations? Yes / No

Are the records listed under the name on the application? Yes / No

If you no longer own the pet, what happened to it?

Have you ever adopted from a shelter before? Yes / No When? _____

What kind of pet? _____

Have you ever surrendered an animal to a shelter? Yes / No When? _____

Why? _____

What is your past experience with cats? Please circle.

First time owner

Current cat owner

Had a cat in the past

How will you correct behavior problems in your cat if they occur?

How much \$ do you plan to spend per year to care for your cat? _____

How many hours a day will your cat be home alone? _____

Are you a frequent traveler? Yes / No

Who will care for your cat if you must be gone for an extended period? _____

Where will you keep the cat during the day? _____

Where will you keep the cat during the night? _____

Are you willing and able to assume the financial responsibilities of pet ownership?

Yes / No

Are you prepared to commit to caring for your new cat for the next 10-20 years?

Yes / No

If you must move from your current place of residence, what will you do with your pet?

Will you allow your cat adequate time to adjust to a new home? Yes / No

How long? _____

Are you aware of the annual routine vaccinations recommended for the health and protection of your cat? Yes / No

Please tell us a little about your household

What is the activity level of your household? Please circle.

Quiet Active Moderate activity

of Children _____ Ages _____ # of Adults _____

Who will be the primary caretaker? _____

This cat/kitten is being adopted as: Please circle all that apply.

**House cat Outside cat Barn cat Gift Mouser Companion For a Child
Indoor/Outdoor Cat Companion for another Pet Breeding**

Does anyone residing in the house have any known pet allergies? Yes / No

Are you familiar with the pet responsibility and liability laws in your area? Yes / No

Do you understand that all adopted cats must be spayed/neutered? Yes / No

Do you plan to allow your cat outdoors unattended? Yes / No

Do you plan to de-claw your cat? Yes / No

If yes, please circle: Front paw declaw Four paw declaw

Circle items you would like more information about.

**Litter box training Cat/Cat Introductions Dog/Cat Introductions Ordinances /Laws Declawing
Cats and Children Spaying/Neutering Training Methods Vaccinations**

How did you learn about our organization? Please circle.

**Pets of the Week Friend/Relative Phone Book Veterinarian
Radio Special event Other _____**

