



## Cat/Kitten Adoption Application

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State: \_\_\_\_\_ ZIP \_\_\_\_\_

Cell/Home phone: \_\_\_\_\_ Home E-mail: \_\_\_\_\_

### **ABOUT THE CAT OR KITTEN:**

1. What type of cat are you interested in?  Male  Female  Kitten (under 5 months)  Adult
2. Name of cat you are interested in: \_\_\_\_\_
3. Personality type: \_\_\_\_\_ Color: \_\_\_\_\_

### **ABOUT YOU AND YOUR HOUSEHOLD:**

4. How many people currently reside in your household? \_\_\_\_\_
5. Are there any children in the household?  Yes  No  
If yes, ages: \_\_\_\_\_
6. For whom are you adopting the cat?  Self  Gift
7. Does any member of the household have any allergies to animals?  Yes  No  
If yes, explain: \_\_\_\_\_
8. Who will be responsible for the cat's care?  
\_\_\_\_\_
9. Where do you live?  Apartment  Condo  Farm  Mobile home  Townhouse  House
10. Do you own or rent your residence?  Own  Rent
11. If you rent, what is name of landlord and phone number? \_\_\_\_\_
12. Are pets animals allowed?  Yes  No  Not sure
13. Where will the cat be kept?  Indoors only  Outdoors only  Both in/out
14. Will anyone be home during the day?  Yes  No
15. How many hours will the cat be left unattended? \_\_\_\_\_
16. When no one is home, where will the cat be kept? \_\_\_\_\_
17. If you move, what will you do with the cat? \_\_\_\_\_
18. How far from the road/traffic is your home located? \_\_\_\_\_
19. Is the volume of traffic  light  moderate  heavy?
20. Have you ever had a pet/animal before?  Yes  No



21. Describe those pets/animals you still care for or that are living in your household.

Name	Breed	Age	Neutered/ Spayed?	Kept Where?	Time in Your Care

22. Describe those pets/animals you no longer care for:

Name	Breed	Age	Neutered/ Spayed?	Kept Where?	Time in Your Care	Reason no Longer with You

23. Are your pets/animals current on their vaccinations?  Yes  No

24. Please provide the name and phone number of your veterinarian

\_\_\_\_\_

25. Are you financially able and willing to provide annual checkups, vaccinations, and ANY medical care necessary?  Yes  No

26. What will you do if your new cat does not get along with your present pets/animals?

27. Are you planning on declawing?  Yes  No  Not sure

28. Why do you want to adopt a cat? \_\_\_\_\_

29. If a disciplinary or behavior problem arises, what steps will you take to correct it?

\_\_\_\_\_

30. Are you familiar with your local animal control laws?  Yes  No

31. Are you willing to sign legally binding pet adoption papers?  Yes  No

32. Do you agree to permit a visit to your home by appointment?  Yes  No

By signing this form, I/we acknowledge that all information on this form is true and correct. I/we understand that any misrepresentation of fact may result in Petaluma Pet Pals refusing adoption privileges to me/us. If my/our request for adoption is approved and it is later discovered that the above information is not true or correct, Petaluma Pet Pals reserves the right to remove the adopted cat/kitten from my home.

Signature \_\_\_\_\_

Date \_\_\_\_\_