



Feline Adoption Application

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

Email: _____

Best way to contact you: _____

How did you hear about us? _____

Which cat are you interested in? _____

Why do you want a cat?

Do you live in a:

Apartment _____ House _____ Townhouse/Duplex _____

Mobile Home _____ Other: _____

Do you own or rent your home? Own / Rent

If you rent, does your lease/landlord allow you to have a cat? Y / N

Are there any restrictions on number or type of pets you can have? Y / N

If so, what are they? _____

Please list other people who live in your home (use back of page if you need more space):

Name	Age:	Sex:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are there any other children that visit your home regularly? Y / N

Will this cat be allowed outside? Y / N

How long will the cat be alone each day? _____

Where will s/he stay when you are away from home? _____

Where will s/he sleep at night? _____

Please list current pets:

Name:	Type:	Age:	Sex:	Spayed/Neutered?
_____	_____	_____	_____	Y / N
_____	_____	_____	_____	Y / N
_____	_____	_____	_____	Y / N
_____	_____	_____	_____	Y / N
_____	_____	_____	_____	Y / N

Please list previous pets (use the back of the page if you need more space):

Name:	Type:	What happened to him/her?
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever given up a pet? Y / N

If yes, what were the circumstances?

If you've had a cat before, what did you like most about it?

What did you like least?

Are you willing to train your cat to correct any problem behavior s/he may have? Y / N

Do you plan to have this cat declawed? Y / N

Are you willing to accept a cat that may have been abused or neglected? Y / N

Do you anticipate any major changes in the next year (moving, new baby, etc.)?

Y / N

If yes, please describe:

Please provide three references. If you have had pets before, one should be your veterinarian. If you rent, one should be your landlord:

Name:	Relationship:	Phone:	Email:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I affirm that all of the information in this application is true to the best of my knowledge. I agree that ORPHAN may reclaim any cat adopted to me as a result of information in this application being false or misleading.

Signature

Date