

Adoption Application -Cats



Name: _____

Address: _____

Home Tel. _____ Work Tel. _____

Address where the animal will be living if different from above:

Address: _____

Name of the care giver at this address: _____

Phone Number : _____

What By-law's are in place for the Municipality in which you live?

Number of animals per household

Have you ever been charged with animal abuse or neglect?

1. What type of pet are you interested in adopting?
2. Why do you want to be a pet owner?

3. Are you adopting a pet for yourself?

Yes

No Who are you adopting it for? _____

4. Where do you live?

House

Apartment

Townhouse

Condo

Farm

5. Do you:

Own

Rent

Live with parents

6. Are there other pets in the home?

Yes

No

If yes, list there species, breed and how many you have.

7. Have you ever had a pet before?

If yes, was the animal spayed or neutered?

What became of him/her?

8. Who is your Veterinarian?

Name:

Clinic:

Telephone #

9. On average how long will you be away from home during the day?

10. Where will the animal be housed?

- Inside
- Outside
- Barn
- Garage

11. Are there elderly people or children living in the house?

12. Is anyone in the house allergic to pets?

13. If you go out of town, what will you do with your pet?

14. In the event you are no longer able to care for this pet, what would you do?

15. Any animal that is not spayed/neutered at adoption time will be required to have the surgery performed within 60 days of adoption, at the owners expense. Would you have any concerns with complying with this policy?

16. If your pet was diagnosed with a chronic illness that required ongoing treatment and medication would you be prepared to invest the time and financial commitment required to meet the animals need.



