

**ADOPT A CAT FOUNDATION
1125 OLD DIXIE HWY UNIT 8
LAKE PARK, FL 33403
561-848-4911
Adoptacatfoundation.org**

ADOPT A CAT ADOPTION APPLICATION

Thank you for your interest in adopting a Adopt a Cat kitty. Adopt a Cat wants to make certain that every cat adopted goes to a loving home in which the cat will be well cared for. Because of this, our application asks a number of detailed questions which are necessary for our screening process.

Your full name; _____

Your age; _____

You must be at least 21 to adopt from Adopt a Cat.

Home Address; _____

City; _____ **State;** _____ **Zip:** _____

Home Phone; _____ **Work phone:** _____ **Cell:** _____

E-mail address: _____

Please complete this section for the household in which your cat will reside:

Type of Residence; House _____ Condo _____ Apartment _____ Mobile Home _____

Do you: Own _____ Rent _____ Live with parents _____ Other _____

If you are a renter or live in a condo, does your landlord allow pets? Yes No

Name of Landlord: _____ **phone #** _____

How long have you lived at this address? _____

Do you have any plans to move in the next few years? _____

How many times have you moved in the past five years? _____

What would you do if you moved to a residence where pets are not permitted? _____

About your Family

How many adults live in this household? _____

How many children? _____ **What are their ages?** _____

Are all members of your household in agreement about adopting a cat? _____

For whom would you be adopting this cat? _____

Who will be the primary caregiver for this cat? _____

Who will be financially responsible for the cat? _____

Do any members of your household have ASTHMA, OR ALLERGIES to cats? Y/N

How will you care for your cat when you are traveling? _____

In the event of an emergency, who would care for your cat? _____

How many hours would the cat be alone during the day? _____

Other Household Pets

PET OR OUTSIDE	SEX	SPAYED/NEUTERED	AGE	KEPT IN
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- 1.
- 2.
- 3.
- 4.

Veterinarian's Name _____ **Phone #** _____

If you have a cat does it get along with other cats? Yes No

Does your current cat go outside? Yes No

If you have a dog, does it get along with cats? Yes No

What veterinary hospital to your animals go to: _____ **Phone #**

Are you experiencing any difficulties with your current pets in terms of health or

Other _____

Type of cat desired (circle all that apply)

Adult Kitten Senior Male Female Declawed Indoor only

Indoor/Outdoor Outdoor only Long Haired Short Hair Other

Desired temperament/Personality: Quiet Playful Active Lap cat

Are you aware that some cats require a period of weeks or even months to adjust to their new home/environment/ other pets? Yes No

Are you willing to allow for this adjustment period? Yes No I prefer a pet

who will adjust quickly Not sure

Are you willing to bring your pet to a veterinarian for yearly exams, and for

Vaccinations per your veterinarian's recommendations? Yes No

Are you willing to commit to providing a home for a cat for the next 10 to 20 Years?

Yes No

What circumstances might justify giving up a cat? (circle all that apply)

Baby Divorce Moving Allergies Shedding Behavior problems

Want to travel Health problems Children lost interest Not using litter box

Cat not getting along with other pets Destructive Scratching Too time

Consuming New household member dislikes cats None

Other _____

If your new cat or kitten exhibits behavioral or adjustment issues, would you be

Willing to seek the advice of a Adopt a Cat representative? Yes No

Please share any kitty habits that you cannot tolerate: Cat on furniture shedding

Chewing plants jumping on counters
Other _____

Please share with us anything you would like us to know about the new cat or kitten that you would like to add to your family. _____

Would you be interested in learning about some of our “special needs” or “long

Term resident” cats who are in need of loving, forever homes? Yes No

Would you be willing to have an in-home visit by a Adopt a Cat representative after you have adopted from us? Yes No

**Would you be interested in joining Adopt a Cat as a monthly supporter? Yes
No**

Any monthly amount would help. Amount pledged monthly
\$ _____

Printed Name_____

Driver's license #_____

Adoption fee_____

Adopt a Cat Representative_____ **Phone #**_____

Cat's Name_____ **Micro chip #**_____

Paid by **Cash** **Check** **Credit card**

We are a tax-exempt 501 C 3 organization which relies solely on donations.