



FIND YOUR NEW BEST FRIEND



CAT ADOPTION APPLICATION

Date: _____

If you are interested in adopting, please fill out the application below. Application processing time usually takes 2-3 days. Please go to our website to see which dog you're interested in. If none are currently available, please fill out an application in advance and we will let you know when new furry friends are up for adoption.

To ensure the best match possible, it is imperative that we learn as much about you and your adoption requirements and desires, as it is for us to inform you about each pet available for adoption to ensure the best match possible.



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APPLICANT INFO

First

Last

Co-Applicants Name

Relationship to Co-Applicant

Email Address

Home Phone

Cell Phone

Home Address

City

State

Zip Code

Please choose -

Do you rent or own your home?

Own Rent Live with parents in owned house Live with parents in rented house

If you rent your home, please attach a letter from your Landlord stating they have granted you approval to acquire a newly adopted cat.

Landlords Name

Phone Number

Are you over 21 yrs of age?: _____ Are you currently employed?: _____

On average, how many hours a day are you away from your home?

2 - 4 5 - 9 10 - 14 At home all day



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While away from your house during the day, where will your pet be kept?
(for example, a small area of the house, entire home, outside, etc....)

Have you planned to have your pet cared for while you're away during the day? If so, please describe: _____

Have you planned for who/how you will care for a pet while on vacation? If yes, please describe: _____

Are you aware that kittens need plenty of exercise and that spending time with them during the day to play will release energy and allow for better sleeping habits at night? yes no

How many people reside in your household?

Adults: _____ Children: _____ Ages of Children: _____

Is anyone in your household allergic to cats?

If yes, please explain how you will handle this:

If a life-changing event occurred (for example - divorce, relocation, new baby) would you still be able to care for this pet? _____

Why do you want to adopt a cat? _____

Will this cat be an outdoor or indoor cat? _____ Indoor _____ Outdoor

Will you be bringing your cat in at night to secure them from predators? _____ Yes _____ No



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OTHER PETS

Do you currently have any pets in your household? yes no

If so, what are their breeds, genders, ages and names? _____

Are they spayed/neutered and current on vaccines? yes no

If not, please explain. _____

Tell us about your family and their cat experience? _____

Have you ever surrendered or re-homed a pet? _____

If so, please state the reason why, where the pet was surrendered and the date?

What type of food do you feed your dogs/cats, or plan on feeding your new pet?

REFERENCES (3 needed, 1 not related)

Name

Relation

Tel #

1. _____

2. _____

3. _____



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Veterinarian Reference:

Name

Tel #

Please give your adoption preferences, for example, breed type, age, gender, color.

Please feel free to provide more information that will help us match you with the perfect pet.

At the time of adoption, I agree to pay the adoption fee of \$225.00, which includes the pre-scheduled spay & neuter surgery to be performed at Roosevelt Veterinary Center. This fee is NON-REFUNDABLE.

I agree that I have answered the application honestly and that Rosy's Rescue has the right to deny this application for any reason?

Which cat are you interested in? _____

I understand that this application does not guarantee me the cat I am applying for and that Adoptions are done on a first come first serve basis. Meaning that you will not have access to the desired pet until your application is completed and approved?



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Terms & Conditions.

Please write your initials after each item.

- 1. No refunds will be given once adoption is complete. _____**

- 2. State law requires that rabies vaccines be given as needed. _____**

- 3. Rosy's Rescue's cats CANNOT BE RELINQUISHED to anyone but Rosy's Rescue. However, the adoption fee is non-refundable. _____**

- 4. We highly recommend that you speak to your Vet regarding appropriate vaccinations for cats. _____**

Signature of Applicant

Date: _____

For office use only: Rosy's Rescue Signature

Approved _____

Not approved _____