

CAT ADOPTION APPLICATION FORM

All questions must be answered. Please provide as much information as possible so that we can better match you to the appropriate pet:

Name of kitten/cat you are interested in adopting: _____

Have you met this kitten/cat in person? YES NO

Tell us in your own words the reason why you want to adopt at this time?

Why do you want this particular kitten/cat where did you first see him/her, and what drew you to this animal?

Adopter Information:

Name: _____

Date of Birth: _____

Address: _____

Mobile Number: _____ Email Address (must have for insurance):

Do all household members know about and agree with adopting this animal?

YES NO

How many people live in your household? _____

Do you have any children? YES NO

If yes, please list their ages: _____

How do your children behave around pets?

Is anyone allergic to hair or dander? YES NO

Are you willing to permit a home check? YES NO

Who will be responsible for the care of this animal?

Who are you adopting the kitten/cat for? (yourself/a family member/other)

How long have you lived at your current address?

Do you own or rent your home?

If you rent, are animals permitted by the landlord? YES NO

Please provide the name and number of your landlord:

Day-To-Day How many hours will the kitten/cat be left alone?

During what time frame?

Where will he/she be kept when alone?

Where will the kitten/cat be kept most of the time?

Indoor only with access to outdoor/Outdoor only with some access to indoor/ Outdoor only

Would you consider a companion for your kitten/cat? Yes No

Previous Animal Experience:

Do you currently own any kittens or cats? If yes, provide breed, sex, age, and current desexing status.

Do you own any other types of pets? If yes, provide breed, sex, age, and current desexing status.

Have you adopted from a shelter/rescue before? If so, when or which group

Have you ever rehomed or returned an animal to a rescue group, animal control, breeder, etc? If yes, please explain in further detail.

What features are you looking for in this pet? Please include size, energy level, personality, age preference, low-shedding/allergen-free, or other qualities you are looking for in this pet.

If you move, what are your plans for this animal and will you consider only pet friendly housing?

Under what circumstances would you return this animal? (circle all that apply)

Allergies; Housebreaking Problems (ie toileting issues); Financial Difficulties; Divorce; Marriage; New Baby; Personal Health Problems; Animal develops Health Issues; Moving Where Pets Aren't Allowed; Bites/Becomes Aggressive; Other:

Please provide details of your current vet:

Some rescues have pre-existing health issues that may require further care by the adopter, would you adopt an animal that has existing health problems?

YES NO

Are you aware of the adoption fee of the animal you are interested in and that you are entitled to a two week trial period on adoption?

YES NO

Are you aware of the costs that will be incurred to maintain a healthy pet? (This includes annual vet checks, vaccinations, flea tick and worm prevention, food, treats, dental care, des, toys, unforeseen accident/illness).

YES NO

Upon adoption, it is the expectation of our rescue that the pet be kept up-to-date with all vaccinations and preventatives, be kept safe and healthy in a loving and nurturing environment. Are you fully prepared to meet these requirements?

YES NO

Do you agree that, if at any time you cannot keep this pet or wish to give it up, you will contact us first?

YES NO

I ascertain that the above information is true and accurate to the best of my knowledge. I understand that falsification of any of this information could result in my adoption application being denied.

Signature:

Please email completed adoption form to manager@struggletownvet.com.au