

Haven's Hope

Feline Adoption Application

This application is to help us in finding the most suitable home for our cats/kittens. Our decision will be made based on the best match for the cat/kitten and the applicant.

Date: _____

Name: _____

Address:

City: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

- Have you owned a cat/kitten before? YES NO
- Do you currently have any other pets in your household? YES NO

If yes, please
list _____

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- Are there children under the age of 18 in the household? YES NO

If yes, please list ages and whether male or
female _____

- Have your children been socialized around cats or kittens before? YES

NO N/A

- Who will be responsible for feeding, cleaning and the general care of this cat/kitten?

- Is this cat/kitten to be a child's responsibility? YES NO

- Do you own your own home or rent? _____

If renting, what is your landlord's name and phone number _____

- Are you living in a house or apartment?

- Where will your pet stay when you are away/ on vacation?

- Who is your current Veterinarian?

- Who was your previous veterinarian if changed within the last 5 years?

- What are your views on annual physical examinations and vaccinations?

- Have your pets been current on exams and vaccinations? YES NO

If not, how come?

- If this cat/kitten becomes ill, will you seek veterinarian care?

Please list all pets owned within the last 5 years:

<u>Type of Pet</u>	<u>Pet's Name</u>	<u>Sex</u>	<u>Age</u>
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Spayed/Neutered?

I GIVE PERMISSION TO HAVEN'S HOPE FELINE ADOPTION AND RESCUE TO CONTACT MY VETERINARIAN TO FOLLOW UP ON MY PET CARE AND HISTORY.

Date: _____ Signature: _____

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND THAT ANY FALSE INFORMATION WILL RESULT IN VOIDING THE APPLICATION.

Date: _____ Signature: _____

Authorized Signature: _____

We do our best to place our cats/kittens that are up for adoption in the most compatible homes. Therefore, we reserve the right to approve or deny any applications.

