

# For Cats' Sake – ADOPTION APPLICATION

P.O. 341246, West Milwaukee, WI 53234

Voicemail: 414-921-0910 www.forcatssake.org email: info@forcatssake.org

In order to be considered for an adoption you MUST:

- Be 21 years of age and have consent of ALL adults living in household
- Internal Use Only:

Application received at: Application received by: Have verifiable identification (i.d. must match address on application) Date received:

- Prove home ownership by supplying a utility bill, tax bill, etc.
- Renters must supply property owners name and phone number

## PRINT CLEARLY

Cat of Interest:

Applicant Name (MU	ST include	<u>middle</u>	initial):
--------------------	------------	---------------	-----------

Co-Applicant Name ( <b>MUST</b> include middle initial):	
Street Address:	City, State, Zip:
Primary Phone:	Secondary Phone (REQD):
Email:	How long have you lived at the above residence?

Please indicate where you live: 
Apartment 
House 
Condo/Townhouse 
Trailer/Mobile Home Do you: Own Carlet Rent. If you rent, supply Landlord name/phone: How long do you plan to live here?

### List your previous address if living at above address less than 2 years:

Street Address:	City, State, Zip:
Slieel Address.	Ully, State, ZIP.

How many adults reside in your household? \_\_\_\_\_ Ages? \_\_\_\_\_ How many children reside in your household? \_\_\_\_\_ Ages? \_\_ Do ANY family members have ANY pet allergies? Y N If yes, please explain: \_\_\_\_\_\_

Describe ALL companion animals that currently live in your household AND those you've had in the last FIVE years (if none in last five please list previous):

Name	Type of animal	Indoor/ Outdoor/ Both	Age or deceased	Intact, Spayed or Neutered?	Declawed (cats)? (circle one)	How long have/did you owned?
					None Front All Four	
					None Front All Four	
					None Front All Four	
					None Front All Four	

Veterinarian & Phone #:

Under whose name are the veterinarian records?

Are you financially able and willing to provide annual checku	s, vaccinations, and ANY medical care necessary? Y N
---	--

Are you prepared for emergency vet care and the associated costs? Y N

Have you ever adopted an animal from a rescue/humane society? Y N Please explain:

Have you ever relinquished a pet to a rescue/humane society? Y	Ν	Please explain:
--	---	-----------------

Do you realize it could be 2-8 weeks before your new cat is comfortable in your home? Y N

Do you realize that many of our pets come from unknown situations and that our volunteers do their best to evaluate and observe the pets in our care, but at no time can we guarantee their long-term health or behaviors? Y N

Application Page 2

#### WHAT ARE YOU LOOKING FOR IN A CAT? (circle all that apply)

Age: Kitten Young Adult Adult Senior No Preference I would like a: Male Female No Preference Other: I need a: Companion for self Gift for someone else Barn cat/mouser Cat should be compatible with: Men Children Women Dogs Cats Other: Will you be declawing this cat? Yes Unsure Already Declawed No I prefer a cat with an activity level that is: Low Medium High No Preference What type of food will you feed your cat? Dry Canned Both The cat will be housed: Indoors Outdoors Both What were/are you feeding your last/present cat: Dry food Canned Food Both Have you thought of where (the room/area in your home) that the cat will be kept in during its transition period to make this time less stressful:

What will you do if your new cat does not get along with your present companion animal(s)?

If a behavioral problem arises, what steps will you take to resolve on it? \_\_\_\_\_

What concerns or questions do you have about adopting a new cat or kitten?

Are you familiar with your local animal control and licensing laws? Y N

How did you learn about this particular cat and the For Cats' Sake Rescue?

Note: FCS makes no representations or warranties regarding the health of the cat. FCS expects the adopter to provide necessary medical care for sickness, disease or injury.

#### **INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.** Applications take 2-3 business days to process.

By signing this form, I/we acknowledge that all information on this form is true and correct. I/we understand that any misrepresentations of facts may result in For Cats' Sake refusing adoption privileges to me/us. If my/our request for adoption is approved and later For Cats' Sake discovers the above information is not true or correct, For Cats' Sake reserves the right to remove the adopted cat from my/our home. I authorize investigation of all statements made in the application, including veterinary records, landlords and other rescues/humane societies. I do understand that this information may be shared with other rescues/humane societies. For Cats' Sake reserves the right to deny my application.

Signature: \_\_\_\_\_

Date:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_