



Cat Adoption Application

Cat Name(s): _____ ID(s) _____

In order to be considered for an adoption you must:

- At least 18 years of age
- Have a current identification showing your age and present address
- Be willing and able to provide loving attention, medical care and lifetime stability for a cat
- Pay an adoption fee
- Be willing to have a home inspection done prior to the final adoption

Date: _____ Name(s) of Adopter: _____

Address: _____ City: _____ State: ____ Zip: _____

Primary Phone: _____ Alternate Phone: _____

Email: _____ Driver's License #: _____ State: ____ Exp: _____

Names of others in household (include ages of children): _____

Length of time at address: _____ Own Rent Live with parents Military

House Condo Apartment Mobile Home Boat

Landlord/HOA name and phone: _____ OK to call? Yes No

If renting, is a deposit required? Yes No Unknown Has it been paid? Yes No

Have you adopted from HSNB before? Yes No

If yes, when? _____ Pet name(s): _____

How did you hear about HSNB?

Petfinder Adopt-a-Pet Craigslist Friend/Family Other

How long have you been looking for a new cat? _____

Who will be responsible for the cat's care? _____

Have you ever surrendered an pet to a shelter or a pound? Yes No

If yes, what was the circumstance: _____

If you are gone all day and this will be your only cat, would you consider adopting another cat to keep it company? Yes No

Who is your current veterinarian? _____

Briefly, why do you want the cat(s) you are applying to adopt?

Your Current Pets	Your Household	Your Ideal Cat
Type/Breed _____ Name _____ Age _____ Sex _____ Spayed/Neutered Yes <input type="checkbox"/> No <input type="checkbox"/> Declawed Yes <input type="checkbox"/> No <input type="checkbox"/> Kept: Inside <input type="checkbox"/> Outside <input type="checkbox"/> Both <input type="checkbox"/> How long have you been caring for this pet? _____ -----	Cat Experience <input type="checkbox"/> First-time guardian <input type="checkbox"/> Have had one or two <input type="checkbox"/> Knowledgeable & experienced Time away from home <input type="checkbox"/> Home all day <input type="checkbox"/> Out part time <input type="checkbox"/> Away 7-10 hours	Coat <input type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long <input type="checkbox"/> No preference Age <input type="checkbox"/> 8—16 weeks <input type="checkbox"/> 4—12 months <input type="checkbox"/> 1—3 years <input type="checkbox"/> Older <input type="checkbox"/> No preference
Type/Breed _____ Name _____ Age _____ Sex _____ Spayed/Neutered Yes <input type="checkbox"/> No <input type="checkbox"/> Declawed Yes <input type="checkbox"/> No <input type="checkbox"/> Kept: Inside <input type="checkbox"/> Outside <input type="checkbox"/> Both <input type="checkbox"/> How long have you been caring for this pet? _____ -----	Our cat will <input type="checkbox"/> Live indoors only <input type="checkbox"/> Live indoors/outdoors <input type="checkbox"/> Live outdoors only <input type="checkbox"/> Live in garage <input type="checkbox"/> Have access to a catio	Activity Level <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High Sex <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> No preference
Type/Breed _____ Name _____ Age _____ Sex _____ Spayed/Neutered Yes <input type="checkbox"/> No <input type="checkbox"/> Declawed Yes <input type="checkbox"/> No <input type="checkbox"/> Kept: Inside <input type="checkbox"/> Outside <input type="checkbox"/> Both <input type="checkbox"/> How long have you been caring for this pet? _____	Home atmosphere <input type="checkbox"/> Grand central station <input type="checkbox"/> Some activity <input type="checkbox"/> Quiet and serene Cat will be <input type="checkbox"/> House Pet <input type="checkbox"/> Mouser <input type="checkbox"/> Gift <input type="checkbox"/> Companion for me <input type="checkbox"/> Companion for my pet <input type="checkbox"/> For the children <input type="checkbox"/> Other _____	I plan to surgically remove: Front Claws <input type="checkbox"/> All Claws <input type="checkbox"/> Unsure <input type="checkbox"/> None <input type="checkbox"/> Why/why not? _____ _____ Allergies in Household? <input type="checkbox"/> Yes <input type="checkbox"/> No

Past Pets - Last 5 Years

Type/Breed _____ Name _____ Age _____ Spayed/Neutered Yes <input type="checkbox"/> No <input type="checkbox"/> Declawed Yes <input type="checkbox"/> No <input type="checkbox"/> Kept: Inside <input type="checkbox"/> Outside <input type="checkbox"/> Both <input type="checkbox"/> How long did you care it? _____ What happened to this pet? _____	Type/Breed _____ Name _____ Age _____ Spayed/Neutered Yes <input type="checkbox"/> No <input type="checkbox"/> Declawed Yes <input type="checkbox"/> No <input type="checkbox"/> Kept: Inside <input type="checkbox"/> Outside <input type="checkbox"/> Both <input type="checkbox"/> How long did you care it? _____ What happened to this pet? _____	Type/Breed _____ Name _____ Age _____ Spayed/Neutered Yes <input type="checkbox"/> No <input type="checkbox"/> Declawed Yes <input type="checkbox"/> No <input type="checkbox"/> Kept: Inside <input type="checkbox"/> Outside <input type="checkbox"/> Both <input type="checkbox"/> How long did you care it? _____ What happened to this pet? _____
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Do all members of your household agree to a new pet? Yes No Unsure

Under what circumstances would you consider re-homing your cat/kitten:

New Baby Allergies Health Issues Behavioral problems New Partner

Shedding Want to Travel Not getting along with other pets

Moving to a place that doesn't allow pets Scratching on furniture or other items None

If the cat hides or cries a lot when it first comes home with you, how much time are you willing to allow the cat to adjust to its new environment? _____

Are you familiar with the way to train a cat to use a scratching post? Yes No

Are you aware that you need to properly introduce you cat or kitten to its litter box? Yes No

Do you know how to gradually introduce new pets to old? Yes No

Have you heard of UTI or crystals in urine? Yes No

May we contact you about adoption and/or fundraising events? Yes No

ADOPTION & RETURN POLICY

The cat can be returned to us at any time, however, the adoption fee is non-refundable after 30 days and will be considered a donation and a surrender fee will be charged.

With certain kittens/cats and/or certain situations, we may not do same-day adoptions, to lessen the chance of placing our animals with impulse adopters.

We believe that it is best to allow potential adopters to have some time to be sure they are ready for the commitment of adopting a new family member. This also gives the adopting family an opportunity to make their home ready for a new addition.

We reserve the right to refuse an adoption for any reason we deem necessary to make sure our animals are placed in permanent, loving homes. We do not adopt kittens under the age of 6 months to families with children age 6 and under. The adult, who will be responsible for the welfare of the pet being adopted, must be present and approved by our adoption counselors before the adoption can be finalized.

I certify that all the information in this application is true and I understand that false information will void the application.

I understand that if the pet(s) adopted do not work out in my home for any reason, at any time, I will return it to Humane Society of the North Bay (HSNB).

If approved, I understand that this application will become part of my adoption agreement, which is a binding document.

Print Name: _____

Signature: _____ Date _____

Approved Yes No Approved by _____

If No, Reason Denied _____

Adoption Counselor Comments _____