



ADOPTION APPLICATION

PREADoption ADOPTION

Pet's name _____ Admit ID # _____

Pet's description _____

Adopter's name _____

Age _____ Home phone (____) _____ Cell (____) _____

Address _____ City/State _____ Zip _____

E mail address (please write clearly) _____

Driver's Lic # _____ May a Project Purr representative visit your home? _____

Do you own or rent your home? If renting, have you verified that pets are allowed? _____

If renting, have you paid the pet deposit? _____ Phone number of landlord _____

Who lives in your home (adults, children, pets) _____

Have you ever had a cat before? _____ Do all others in the home want a cat? _____

Is this cat for you or is he/she a gift to someone else? _____

Who will be the primary caregiver for the cat? _____

How long have you lived at your current address? _____

Does anyone in the home have allergies or asthma? _____

Occupation and place of employment _____

How long at current place of employment? _____

What would cause you to give up this cat? Nothing – I am making a lifetime commitment

Allergies Pressure from significant other or loved one Moving to a new home

Expenses related to the cat Cat scratching on furniture Cat jumping on counters

Excessive shedding Cat accidentally breaking something

Name of your veterinarian _____

Are you able to afford yearly vet visits for vaccinations and health check-up? _____

Are you aware that cats often live 15 – 20 years? _____ Can you care for a cat that long? _____

Are you able to afford emergency medical care for your cat if needed? _____

If adopting a kitten, are you aware that kittens can require more medical care during the first year of life, compared with adult cats, resulting in more expenses? _____

Where will this cat live? Inside only Inside and outside Outside only

Other pets in the home:

Dogs (include size/breed and age) _____

Cats (include age) _____

When was your last visit to the vet, and why? _____

Have you already gotten supplies for this cat? (litter box, litter, scoop, pet carrier, scratching post, Food, bowls) _____

If you have other pets, how will you introduce this cat to your household? _____

Do you plan to declaw this cat? _____

How did you hear about us? _____

Suggestions for how we can improve _____

I certify that the above information is accurate to the best of my knowledge. I agree to let Project Purr BR contact my veterinarian, employer, and others for purposes of personal reference. I also understand that Project Purr BR reserves the right to refuse adoption to me for any reason.

Adoption applicant

Project Purr representative

Date of application