

**ADOPT A CAT FOUNDATION  
1125 OLD DIXIE HWY UNIT 8  
LAKE PARK, FL 33403  
561-848-4911  
Adoptacatfoundation.org**

**ADOPT A CAT ADOPTION APPLICATION**

**Thank you for your interest in adopting a Adopt a Cat kitty. Adopt a Cat wants to make certain that every cat adopted goes to a loving home in which the cat will be well cared for. Because of this, our application asks a number of detailed questions which are necessary for our screening process.**

**Your full name;** \_\_\_\_\_

**Your age;** \_\_\_\_\_

**You must be at least 21 to adopt from Adopt a Cat.**

**Home Address;** \_\_\_\_\_

**City;** \_\_\_\_\_ **State;** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Home Phone;** \_\_\_\_\_ **Work phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**Please complete this section for the household in which your cat will reside:**

**Type of Residence;** House \_\_\_\_\_ Condo \_\_\_\_\_ Apartment \_\_\_\_\_ Mobile Home \_\_\_\_\_

**Do you:** Own \_\_\_\_\_ Rent \_\_\_\_\_ Live with parents \_\_\_\_\_ Other \_\_\_\_\_

**If you are a renter or live in a condo, does your landlord allow pets? Yes No**

**Name of Landlord:** \_\_\_\_\_ **phone #** \_\_\_\_\_

**How long have you lived at this address?** \_\_\_\_\_

**Do you have any plans to move in the next few years?** \_\_\_\_\_

**How many times have you moved in the past five years?** \_\_\_\_\_

**What would you do if you moved to a residence where pets are not permitted?** \_\_\_\_\_

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**About your Family**

**How many adults live in this household?** \_\_\_\_\_

**How many children?** \_\_\_\_\_ **What are their ages?** \_\_\_\_\_

**Are all members of your household in agreement about adopting a cat?** \_\_\_\_\_

**For whom would you be adopting this cat?** \_\_\_\_\_

**Who will be the primary caregiver for this cat?** \_\_\_\_\_

**Who will be financially responsible for the cat?** \_\_\_\_\_

**Do any members of your household have ASTHMA, OR ALLERGIES to cats?** Y/N

**How will you care for your cat when you are traveling?** \_\_\_\_\_

\_\_\_\_\_  
**In the event of an emergency, who would care for your cat?** \_\_\_\_\_

\_\_\_\_\_  
**How many hours would the cat be alone during the day?** \_\_\_\_\_

**Other Household Pets**

<b>PET OR OUTSIDE</b>	<b>SEX</b>	<b>SPAYED/NEUTERED</b>	<b>AGE</b>	<b>KEPT IN</b>
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- 1.
- 2.
- 3.
- 4.

**Veterinarian's Name** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**If you have a cat does it get along with other cats?** Yes No

**Does your current cat go outside?** Yes No

**If you have a dog, does it get along with cats?** Yes No

**What veterinary hospital to your animals go to:** \_\_\_\_\_ **Phone #**

**Are you experiencing any difficulties with your current pets in terms of health or**

behavior?    Yes    No    If yes  
describe: \_\_\_\_\_

Did you have pets growing up?                      Yes                      No

Have you had the experience of being a primary caregiver to a cat?    Yes    No

Have you ever given a pet away, given it to a shelter or rescue group, returned it to a breeder or sold it?    Yes    No

Have you ever had an animal for a short period of time and it didn't work out?  
Yes    No

Have you ever had an animal lost or stolen?    Yes    No

Have you ever had to retrieve your animal from a pound, shelter or animal control facility?    Yes    No

Have you ever had an animal die as the result of being hit by a car, being poisoned or from unknown causes?    Yes    No

Have you previously adopted from Adopt a Cat Foundation?    Yes    No

Please list all the past pets you have had in the last ten years and why you no longer have them (died of old age, euthanized, gave away, hit by a car, etc)

PET

WHY YOU NO LONGER HAVE IT

1.

2.

3.

Will the cat live            Indoors only    Indoors/outdoors            Outdoors  
Not sure

Where will the cat be when nobody is home?    Indoors            Outdoors

Will the cat be allowed to have free roam of your home?    Yes    No

Will you declaw your cat?            Yes            No

What veterinary practice do you plan to use? \_\_\_\_\_

Reason for wanting to adopt?    Companion            Mouser

Other \_\_\_\_\_

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Type of cat desired (circle all that apply)

Adult    Kitten    Senior    Male    Female    Declawed    Indoor only

Indoor/Outdoor    Outdoor only    Long Haired    Short Hair    Other

Desired temperament/Personality:    Quiet    Playful    Active    Lap cat

Are you aware that some cats require a period of weeks or even months to adjust to their new home/environment/ other pets?    Yes    No

Are you willing to allow for this adjustment period?    Yes    No    I prefer a pet

who will adjust quickly    Not sure

Are you willing to bring your pet to a veterinarian for yearly exams, and for

Vaccinations per your veterinarian's recommendations?    Yes    No

Are you willing to commit to providing a home for a cat for the next 10 to 20 Years?

Yes    No

What circumstances might justify giving up a cat? (circle all that apply)

Baby    Divorce    Moving    Allergies    Shedding    Behavior problems

Want to travel    Health problems    Children lost interest    Not using litter box

Cat not getting along with other pets    Destructive Scratching    Too time

Consuming    New household member dislikes cats    None

Other \_\_\_\_\_

If your new cat or kitten exhibits behavioral or adjustment issues, would you be

Willing to seek the advice of a Adopt a Cat representative?    Yes    No

Please share any kitty habits that you cannot tolerate:    Cat on furniture shedding

**Chewing plants    jumping on counters**  
**Other** \_\_\_\_\_

**Please share with us anything you would like us to know about the new cat or kitten that you would like to add to your family.** \_\_\_\_\_

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**Would you be interested in learning about some of our “special needs” or “long**

**Term resident” cats who are in need of loving, forever homes?    Yes    No**

**Would you be willing to have an in-home visit by a Adopt a Cat representative after you have adopted from us?    Yes    No**

**Would you be interested in joining Adopt a Cat as a monthly supporter?    Yes  
No**

**Any monthly amount would help.    Amount pledged monthly**  
**\$** \_\_\_\_\_



**Printed Name**\_\_\_\_\_

**Driver's license #**\_\_\_\_\_

**Adoption fee**\_\_\_\_\_

**Adopt a Cat Representative**\_\_\_\_\_ **Phone #**\_\_\_\_\_

**Cat's Name**\_\_\_\_\_ **Micro chip #**\_\_\_\_\_

**Paid by**      **Cash**                      **Check**                      **Credit card**

**We are a tax-exempt 501 C 3 organization which relies solely on donations.**