



## ADOPTION APPLICATION

Today's date: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
City: \_\_\_\_\_ Email Address: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

### **Household**

\*Number of Adults Currently Living in Your Household (including yourself): \_\_\_\_\_  
\*Number of children currently living in your household 17 years old and younger: \_\_\_\_\_  
\*Number of Children Who MAY visit your home and are Under the Age of 17: \_\_\_\_\_  
\*Do you currently Own or Rent your home?  Own  Rent  Other: \_\_\_\_\_  
\*What type of home do you currently live in?  1 Story House  2 Story House  Apartment  Mobile  
\*Please list your Landlord's Name and Phone Number below. \_\_\_\_\_  
\_\_\_\_\_

\*What is the activity level in your home?  Quiet  Active  Hectic  
\*How much time do you spend at home?  Rarely Home  Home When Not Working  Home All Day  
\*How much time does your family spend at home?  Rarely Home  Home When Not Working  Home All Day  
\*Does any member of your household have allergies to animals?  YES  NO  MAYBE  
\*What will you do if someone in your household develops allergies to this pet? \_\_\_\_\_  
\_\_\_\_\_

\*Have you ever moved while owning a pet?  YES  NO  
\*If so, what happened to your pet? \_\_\_\_\_  
\*Do you have plans to move? If so, when? \_\_\_\_\_  
\*Is your home smoke free?  YES  NO

### **Employment**

What is your current employment status?  Full-Time  Part-Time  Seasonal  Unemployed  Retired  
 Other: \_\_\_\_\_  
What is the name and phone number of your current employer? \_\_\_\_\_  
What is the name and phone number of your spouse's employer? \_\_\_\_\_

### **Pets**

\*What is your pet ownership history?  Never Had Pets  Had Pets as a Child  Had Pets All My Life  Currently Have Pets  Other: \_\_\_\_\_  
\*Please list the types, ages and names of each of your pets. \_\_\_\_\_  
\_\_\_\_\_  
\*Are each of your pets spayed and/or neutered?  YES  NO  NOTE: \_\_\_\_\_  
\*Are your pets currently vaccinated and up-to-date with their vet care?  YES  NO  NOT APPLICABLE  
\*When was the last time your pet(s) had a vet visit? \_\_\_\_\_  
\*If you have cats, are they indoor only?  YES  NO  NOT APPLICABLE  
\*Have you ever adopted from us before?  YES  NO If so, when and where is this pet now? \_\_\_\_\_

**TURN OVER -**

## ADOPTION APPLICATION (continued)

### Preparing for a cat

\*How long have you been thinking about adopting a cat/kitten? \_\_\_\_\_

\*Are you prepared to care for this pet for their average life expectancy of up to 20 years?  YES  NO

\*Where would the cat be kept during the night? \_\_\_\_\_

\*Where would the cat be kept during the day? \_\_\_\_\_

\*Cats are as individual as people and need time to adjust to a new environment. Are you willing to spend time and effort in helping this cat adjust to your family?  YES  NO

\*How long do you think this adjustment should take? \_\_\_\_\_

\*Do you plan to declaw your adopted cat?  YES  NO

### Adoption

\*Why do you want to adopt a cat? Please check all that apply.  Family Companion  Current Companion for pet(s)

Indoor Mouser  Breeder  Barn Cat  Gift - For whom?: \_\_\_\_\_  Other:

\_\_\_\_\_

\*Please select your preference below for this adoption application.  Senior Cat (10+ years old)  Adult Cat (6 months - 9 years old)  Kitten (less than 5 months old)

\*Did you see anyone on our website and/or Petfinder who you would be interested in meeting? \_\_\_\_\_

\*What personality traits are you seeking in a cat? Please check all that apply.  Active/High Energy  Very Affectionate

Lap Cat  Quiet  Independent  Easy-going/Gentle  Curious  Outgoing/Extroverted  Shy-Introverted

Other: \_\_\_\_\_

\*Will your cat be allowed outdoors?  YES  NO  UNDECIDED

\*Under what circumstances would you not keep this cat? \_\_\_\_\_

\*What arrangements would you make for your pet if you have to move or if you are no longer able to care for them?

\_\_\_\_\_

\*Please provide your veterinarian's name & phone number for reference. \_\_\_\_\_

\*Have you given your veterinarian permission to speak with us? This is required to process your application.  YES  NO

\*Would you object to an inspection of your premises by our staff?  YES  NO

\*How much would you expect to pay in vet care, food, toys, etc. per year? \_\_\_\_\_

\*Animals rescued by Forgotten Felines and Fidos come from a variety of situations; and are given prompt medical care, health checks & quarantined to ensure illness is not spread. All are monitored while in foster care, but there is always a chance they are harboring an illness without showing any symptoms. Are you prepared to be fully responsible for immediate medical care if illness should occur?  YES  NO

\*Yearly vet exams are integral to the health of any pet. Spay, neuter & vaccinations are required by state law. Annual vet visits for an altered adult cat can cost about \$50-100. Kittens can cost double this amount due to initial monthly vaccinations and wormings. Food, litter, and other supplies can cost on average \$100-200 for each pet each month. Do you have the financial resources to properly care for this pet?  YES  NO

\*Would you like information on:  Litter training  Scratching prevention  Feeding  Vaccinations/Vet care

Introducing a new pet  Other: \_\_\_\_\_

\*How did you hear about Forgotten Felines and Fidos?  Social Media  Friend Referral  Previous Adopter  FFF

Newsletter  Newspaper  FFF Website  Petfinder  Volunteer  Other: \_\_\_\_\_

***If you agree to the following statement, please put your first name, last name and today's date. I certify that all the information in this application is true and I understand that false information may void the adoption and future adoption applications from Forgotten Felines and Fidos, Inc.***

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Current Date