

**COMPASSION FOR CATS
CAT ADOPTION APPLICATION**



Cat Name _____

Name _____ Home Phone _____

Address _____ E-mail _____

City/State/Zip _____ Occupation _____

Best way to contact you _____ Work Phone _____

Do you rent or own your home? _____

If renting, do you have the landlord's permission to keep pets? ___ How many? ___

(landlord's name & phone number and notarized letter may be required)

How many people live at your home? _____ Does anyone have allergies? _____

Please list the age and sex of all children in your home: _____

Who will be responsible for the primary care of this cat? _____

Who will care for this cat during emergencies or when you travel? _____

What veterinarians have you used in the past? _____

What veterinarian will you use for this cat? _____

Please tell us about the pet(s) you have now or in the past: _____

What happened to the pet(s) that you no longer have? _____

Do you plan to have this cat declawed? _____

Will this cat be indoors, outdoors, or some of each? _____

If you ever had to give up this cat, what would you do with it? _____
