

Cat's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex: \_\_\_\_\_ Breed/Markings: \_\_\_\_\_ Date: \_\_\_\_\_



Our focus is to place cats in loving, life-long homes where they will be cared for responsibly. Potential adopters or fosters are screened, up to and including home visits. We reserve the right to refuse placement of an animal for any reason. We thank you your understanding.

**Applicant Information**

Name:	Age:	Name of <input type="checkbox"/> Spouse <input type="checkbox"/> Partner <input type="checkbox"/> Roommate:
Address:	Driver's License #:	
City/St/Zip:	Employer:	
Home Phone:	Occupation:	
Cell Phone:	Work Phone:	
Personal Email:	Work Email Address:	

How did you hear about us? \_\_\_\_\_

Have you spoken/corresponded with anyone from NBCR?  Yes  No If yes, who? \_\_\_\_\_

Have you ever adopted a pet from NBCR?  Yes  No Which pet? \_\_\_\_\_

Have you ever adopted from any other rescue?  Yes  No If yes, which one? \_\_\_\_\_

**Prospective Pet Adopter Information**

Why would you like to adopt a cat today? \_\_\_\_\_

Is there a cat in particular you are interested in?  Yes  No If so, what is their name? \_\_\_\_\_

If not, do you have any preferences on age, hair length, personality, etc.? \_\_\_\_\_

What kind of cat are you looking for?  House Cat  Mouser  Barn Cat  Gift  Companion for Pet

Who is the cat for? \_\_\_\_\_ Who will be the primary caregiver? \_\_\_\_\_

Where will you keep the litter box? \_\_\_\_\_ What kind of food will you feed this cat? \_\_\_\_\_

How long will you give this cat to adjust to your home? \_\_\_\_\_

Where will this cat stay during the day? \_\_\_\_\_ During the night? \_\_\_\_\_ When you travel? \_\_\_\_\_

Cat's Name: \_\_\_\_\_

Date: \_\_\_\_\_

Would you consider declawing this cat?  Yes  No

Will this cat be an  indoor,  outdoor or  indoor/outdoor cat?

Will you allow a NBCR representative to visit your home?  Yes  No If no, why? \_\_\_\_\_

### **Household Information**

How many individuals are in the household? \_\_\_\_\_ How many are children? \_\_\_\_\_ Ages? \_\_\_\_\_

Do ALL of the individuals at your home consent to the adoption of this pet?  Yes  No

Have they been around cats before?  Yes  No If yes, when? \_\_\_\_\_

Are there any children who visit your household frequently?  Yes  No If yes, what are their ages? \_\_\_\_\_

Does anyone in the household have allergies to cats?  Yes  No Do you have a pet door?  Yes  No

Is your home a  house,  apartment or  mobile home? How long have you lived there? \_\_\_\_\_

If you live in a house do you have a pet door?  Yes  No If so, where does it lead to? \_\_\_\_\_

Do you  own your home or are you  renting? If renting, does your lease allow pets?  Yes  No

If renting, are there limits on the # of pets?  Yes  No Have you paid your pet deposit?  Yes  No

Can NBCR call your landlord / apartment complex?  Yes  No Name & number: \_\_\_\_\_

Do you plan to move in the near future?  Yes  No If yes, what will you do with your pets? \_\_\_\_\_

Do you plan on becoming pregnant?  Yes  No If yes, what will you do with your pets? \_\_\_\_\_

Do you plan on getting married?  Yes  No If yes, what will you do with your pets? \_\_\_\_\_

Do you plan on getting divorced?  Yes  No If yes, what will you do with your pets? \_\_\_\_\_

### **Applicant's Pets**

Do you currently own a cat(s)?  Yes  No How many? \_\_\_\_\_ Breed? \_\_\_\_\_ Age? \_\_\_\_\_

If yes, have they been tested for FIV/FelV?  Yes  No If yes, what were the results? \_\_\_\_\_

If you currently have cats, are they declawed?  Yes  No If yes, why did you choose to declaw? \_\_\_\_\_

Do you currently have any other pets?  Yes  No If yes, please list species & age. \_\_\_\_\_

If you have pets, are they spay/neutered?  Yes  No Up to date with vaccinations?  Yes  No

On monthly heartworm & flea prevention?  Yes  No If yes, what kind? \_\_\_\_\_

Do you travel frequently?  Yes  No Who cares for your pet(s) while you travel? \_\_\_\_\_

Where do your pets stay during the day? \_\_\_\_\_ During the night? \_\_\_\_\_ When you travel? \_\_\_\_\_

Have you had any other pets in the last five years that you do not currently have?  Yes  No

If yes, why are they no longer with you? \_\_\_\_\_

Have you ever surrendered an animal to a shelter, animal control, rescue group or rehomed it yourself?  Yes  No

If yes, why? \_\_\_\_\_

Cat's Name: \_\_\_\_\_

Date: \_\_\_\_\_

What is the name & number of your current or last vet? \_\_\_\_\_

Do you give NBCR permission to contact your vet?  Yes  No

Please list the pet's name that visited this vet. \_\_\_\_\_

Please list the name, address and number of the person(s) who will care for your pets if you should become ill, disabled or deceased. \_\_\_\_\_

I understand that the cat I am adopting could live as long as 25 years; that pet ownership involves yearly medical costs, food costs, wear and tear on furniture; that animals do not come with a guarantee, and as the adopter I am accepting full responsibility for the animal's quality of life? \_\_\_\_\_ Initials

### **Return Policy**

\_\_\_\_\_ I agree that if for any reason I can no longer keep this animal, I will contact my adoption counselor and NBCR to make arrangements to return the animal to New Beginnings Cat Rescue

\_\_\_\_\_ I understand that my adoption fee is non-refundable if I have not contacted my adoption counselor and NBCR within 10 days from the adoption date to notify them of any problems, issues or concerns and the possibility of returning the cat to NBCR.

\_\_\_\_\_ I am in agreement that unannounced follow-up visit(s) may be made to my home by NBCR and that any violation of this contract is good and sufficient reason for reclaiming of said pet by NBCR.

\_\_\_\_\_ For the safety and health of all animals in your home, I agree to follow the advice given by my adoption counselor. I agree to take the appropriate amount of time to let this cat adjust to my home and to follow the proper steps outlined in the enclosed article.

Our cats come from a variety of situations. Some have been abandoned, neglected or abused. Some have been dumped or surrendered at shelters, and many are ill or malnourished when rescued. Although the animal has been in a protected environment and received medical care, there is the possibility of unrecognized illness appearing after an adoption is finalized, especially because of the stress the animal may experience during the first few days at its new home. We advise adopters of the animal's known history and provide its veterinary records, but frequently we know only what the animal chooses to tell us.

\_\_\_\_\_ I understand that NBCR **cannot make any guarantee regarding the long-term health of any animal.**

\_\_\_\_\_ In addition to providing love, attention and regular medical care, I am willing to invest the time and money required to care for this cat.

Adopters agree to hold New Beginnings Cat Rescue, the adoption venue, and all volunteers blameless and not liable for any injury, illness or behavioral problems that should be discovered now or in the future. My signature indicates I have answered all of the above questions honestly and to the best of my ability.

Adopters Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Adoption Counselors Signature: \_\_\_\_\_

Date: \_\_\_\_\_