

HEARTLAND ANIMAL SHELTER

CAT ADOPTION APPLICATION

Heartland Animal Shelter reserves the right to approve or deny applications. Applications are considered with the best interests of the animals in mind and should not be construed as a reflection on the applicant.

In order to adopt, Applicants **must**:

- 1) be 21 years of age or older and a U.S. citizen,
- 2) have the consent of all adults living in the household,
- 3) have a valid state-issued ID with current address, and
- 4) have a current lease or landlord's name and phone number for verification that pets are allowed (for renters only).

Please Note: False or omitted information will result in an application being denied.

Please Print

Today's Date _____ Cat Name _____ Adoption Counselor _____

Your Name _____ Home # _____

Work # _____ Cell # _____ Email _____

Home Address _____
City State Zip

Employer _____ Phone _____

Veterinarian _____ Phone _____

Reference _____ Phone _____

How did you learn about Heartland Animal Shelter? _____

About your household:

Type of Residence: *House / Apartment / Condo / Mobile Home / Military Base / Dorm / With Parents*

Do you: Own ___? Rent ___? Landlord's Name & Phone # _____

Number of Adults _____ Number of Children _____ Children's' Ages _____

Who will be responsible for feeding the pet? _____

Will the pet be indoor, outdoor, or both? _____

Why are you seeking to adopt a cat today? *(Please circle all that apply)*

Companion for adults / Companion for children / Companion for another pet / Mouser / Gift / Other _____

Please list all pets you have owned in the past five years:

Pet's Name	Type/Breed	Kept Where? (i.e. indoor / outdoor)	Current Age (if applicable)	Gender	Spayed / Neutered?	Current Status (deceased, still own, etc?)
				M F	Y N	
				M F	Y N	
				M F	Y N	
				M F	Y N	
				M F	Y N	
				M F	Y N	

When was your pets' last visit to the vet? _____ Purpose? _____

Is anyone in your household allergic to cats? _____

If you move, what will you do with your pet(s)? _____

Under what circumstances would you not keep the cat? _____

What days/times would be convenient for a follow-up home visit by Heartland? _____

Pet Care:

Approximately how much do you anticipate spending **annually** to feed, vaccinate, license, and provide medical care (routine and emergency) for your new cat? \$50_____ \$50 - \$100_____ \$100 - \$150_____ Over \$200_____

The pet will be without human companionship for approximately _____ hours per day, _____ hours per week.

Where will the cat be kept during the day? _____ During the evening? _____

If the cat becomes destructive, what would you do? _____

Do you plan to de-claw your cat? _____

How will you train your cat not to scratch furniture? _____

How will you train your cat to stay off of countertops and tables? _____

What will you do if your cat urinates outside of the litter box? _____

What type of identification do you plan to place on your cat? _____

Would you consider adopting two cats for mutual companionship? _____

Cats can take up to a month to adjust to their new homes, particularly if there are other pets.

Are you willing to devote this time? _____

You will be required to bring a cat carrier upon picking up your cat(s)/kitten(s) for their own safety when traveling.

Are you able to provide a carrier? _____

By signing below, I recognize that this application is the property of Heartland Animal Shelter. I certify that the information I have given is true and correct. I understand that false information can result in the denial of this adoption. I authorize Heartland Animal Shelter to investigate the statements on the application, and further understand that Heartland has the right to deny this application for any reason.

Signature _____ Date _____

<u>STAFF USE ONLY</u>		
ID # _____	Name of Cat _____	Age _____
Adoption Counselor's Name: _____		
Comments: _____		
Scheduled pick-up date (notes) _____		
Date & time for spay/neuter (if applicable) _____		
Staff Adoption Approval Signature _____		