

## Cats in Need

## **Adoption Application**

\*Please email the completed application to catsinneedpetsmartwhittier@gmail.com or deliver to the Adoption Manager during the adoption events on the weekend.

\*\*Completion of this application does not constitute an approval for adoption of this cat. Providing inaccurate, false, or incomplete information may result in delay or denial of this application

Name of cat(s)/kitten(s) you are interested in		Applicant's Name				Date	
Home Address/City/Zip Code		Email Address:					
		Calif Drivers License No.:					
Home Phone Number Cell Phone		e Number Work Phone			e Number		
Do you live in a (circle one): House	e Ap	artment	Co	ndo	Mobile	e Home	
Do you (circle one): Own or Rent							
How long have you lived there?							
Landlords's Name and Phone Number or Homeowners Associations Phone Number (if applicable)							
May we contact your landlord or homeowners association?							
Do you work (circle one): Full Time Part Time Student Retired							
List the NAMES and AGES of all persons living in your household.							
_		-					
Is anyone in the household allergic to ca	ats?						
is anyone in the nousehold unergic to ea	ats:						
Do you have any objections to a Cats in	Need Vol	unteer visi	iting vour l	nome, eithe	r before	or after the adoption?	
			07	,		1	
Have you applied to adopt a cat or dog from this organization or any other in the past 5 years?							
If so, what organization and what was the outcome?							
Why do you want this/these particular cat(s)/kitten(s)?							
Please tell us about your current pets:							
Type/Breed Age/Sex	Spayed/	Neutered	Declawed	Inside/C	utside	How long owned	
						-	

Please list the names and reasons why previous pets are no longer with you (i.e. Fluffy died in 2012 at age 12, kidney failure):
List the name(s) of the Veterinarian(s) and phone number(s) that your current and/or previous pets have been seen by:
What will happen to the cat(s) if you should move?
What circumstances would cause you to give up this/these cat(s)?
What will happen to the cat(s) if you can no longer care for it/them?
If you travel, who will care for your cat(s)?
How many hours a day will the cat(s) be left alone?
What is the activity level in your home? (circle one) Quiet Moderate Active Very Active
Will you declaw this cat?
Will the cat be (circle one): Indoors Outdoors Both  Cats have been known to claw furniture, climb drapes, etc. How will you deal with this?
Do you have a pet door in your home?  Will the gat(s) have access to the (places circle). Outdoors. Corego. Paleony. Datio. Programs.
Will the cat(s) have access to the (please circle): Outdoors Garage Balcony Patio Breezeway  On the first night, where will the cat(s) sleep?
On the first hight, where will the cat(s) sleep:
Where will you keep the litter box?
Where will the cat(s) primarily stay (House, yard, it's own room, crate, etc.)
Are you aware that cats need routine veterinary care throughout their life?
Are you willing and financially able to provide routine medical care and in the event this cat should become ill or injured?
How did you learn that Cats in Need had cats available for adoption?
Cats in Need will only place cats in "responsible, loving, and safe homes". Please tell us why you should be the new "parents" to this/these cat(s)/kitten(s).
***All applications are subject to review by the CIN board. In the event of multiple applications for the same cat, the board reserves the right to select the best suited home for the cat.
PLEASE SIGN FOR VERIFICATION OF INFORMATION