



**ADOPTION DONATIONS:**

**The tax deductible donation for adopting a cat or kitten is \$225.**

**Please note that we only accept Adoption Applications from those who live in the NY Tri-State area.**

If you are applying for a specific cat, please enter the cat's name here: \_\_\_\_\_

**ADOPTING A CAT**

When you adopt a rescue animal, you are making a commitment to love and care for the cat, arrange regular vet check-ups for him/her and otherwise care for his/her health, solve behavioral problems, reduce stress, give plenty of exercise/toys, healthy food, and not physically or emotionally abuse him/her for any reason. This is what it takes to adopt a rescue. Now you must ask yourself--**am I really ready??**

**ABOUT YOU:**

Applicant's Full Name: \_\_\_\_\_ Age \_\_\_\_\_

Address: \_\_\_\_\_ Home Tel: \_\_\_\_\_

Mobile: \_\_\_\_\_ Work Tel: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_

Do you work from home? \_\_\_\_\_ Do you attend school? \_\_\_\_\_

*Co-Applicant (if any):*

Co-Applicant's Full Name: \_\_\_\_\_ Age \_\_\_\_\_

Mobile: \_\_\_\_\_ Work Tel: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_

Do you work from home? \_\_\_\_\_ Do you attend school? \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_ If so, please explain. \_\_\_\_\_

Why do you want to bring a cat into your home, and why do you feel your home would be the best home for this cat?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long have you been looking for a cat? \_\_\_\_\_

Is everyone in your household in agreement about adopting a cat? \_\_\_\_\_

Who will be primarily responsible for the feeding and care of this cat?

\_\_\_\_\_

Is the cat you are applying for going to be a gift? \_\_\_\_\_

**ABOUT YOUR HOUSEHOLD:**

Names and ages of all adults in the household: \_\_\_\_\_

Ages of children in the household: \_\_\_\_\_

Is anyone in your home allergic to animals? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

Does anyone in your household smoke cigarettes or cigars inside the home? \_\_\_\_\_

Do any members of your household fear animals? \_\_\_\_\_

Are you familiar with animal regulations in your building and area? \_\_\_\_\_

**ABOUT YOUR HOME:**

Do you own or rent? \_\_\_\_\_ If you rent, please list landlord's name and phone number:

\_\_\_\_\_

Are you planning to move in the near future? \_\_\_\_\_

Please briefly describe your home: \_\_\_\_\_

\_\_\_\_\_

Does your building permit pets? \_\_\_\_\_

How many hours during a typical day will the cat be left alone? \_\_\_\_\_

Do you have screens on all your windows? \_\_\_\_\_

If you should become ill, disabled, or should die, who will take care of your cat, and what is that person's relationship to you?

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Please list any companion animals currently living in THAT PERSON'S household:

Breed: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Neutered: \_\_\_\_\_

Should your adopted cat develop special needs over time, will you still keep this cat, get proper veterinary care and follow your vet's guidelines, including whatever treatments/medications/special foods are required? \_\_\_\_\_

Do you have the financial means to properly care for the cat? \_\_\_\_\_

Would you consider buying cat insurance? \_\_\_\_\_

Will you assume all financial responsibilities for the pet you adopt, including inoculations, regular veterinary care, good quality food, and a safe environment? \_\_\_\_\_

**PET HISTORY:**

Have you had cats in the past? \_\_\_\_\_ How many years did you own your cat(s)? \_\_\_\_\_

Reason for no longer owning the cat(s)? \_\_\_\_\_

Have any of your cats ever gotten lost? \_\_\_\_\_ Poisoned? \_\_\_\_\_ Hit by a vehicle? \_\_\_\_\_

Have you ever given a cat to a shelter? \_\_\_\_\_

Please list any pets currently residing in your home, with name(s), breeds(s) and age(s):

\_\_\_\_\_

Please describe pets you've had in the past, (including breed, and what training they had), and your history with them:

\_\_\_\_\_

**PERSONAL REFERENCES:**

Please provide names, phone numbers, and relationship of two people not related to you:

**(see veterinary reference note below)**

1. \_\_\_\_\_

2. \_\_\_\_\_

**VETERINARY REFERENCE: (If you have not owned a pet and have no vet reference, please add a third personal reference above)**

Veterinary's name, address, and phone number:

\_\_\_\_\_

You will be required to complete an adoption contract if you decide to go forward with this adoption.

I agree, by signing below, that if I adopt a pet from **Woof Dog Rescue**, I will have him/her checked by my own veterinarian within (7) seven days of the adoption, and I will provide medical care, at my own expense, for any conditions previously unknown to **Woof Dog Rescue**, as well as routine yearly exams and necessary inoculations for as long as I own the pet. **Woof Dog Rescue** will provide a veterinarian's report which must be furnished to my own vet along with the papers provided to me from the shelter.

If there is ever a time when I am unable to care for this pet, or, if after a trial period, I find that the situation isn't working out, I agree to contact Barbara Fox of **Woof Dog Rescue**, who will take the pet back and find another home.

I understand and agree that giving false information in response to any of the questions above will disqualify me from adopting a pet from **Woof Dog Rescue, Inc.**, and will nullify all adoption(s) and/or adoption agreements between the applicant and **Woof Dog Rescue**.

Agreed and Accepted:

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_