

## **Adoption Form**

Private home-to-home adoption is available from FosterCat, Inc.

In order to be considered for an adoption today, you must:

- 1. Be at least 21 years of age.
- 2. Be the person primarily responsible for the cat to be adopted at the address where the cat will be housed.
- 3. Have legal identification with your current address.
- 4. Be able to verify that you can have a pet where you live.

Date of Adoption \_\_\_\_\_

5. Understand that FosterCat, Inc. reserves the right to deny the adoption of any pet for any reason.

Pet ownership is a major responsibility, and one that should not be taken lightly. In FosterCat's ongoing effort to find the best possible homes for all of its animals, we ask that you take the time to fill out this questionnaire and expect to spend time discussing it with one of our adoption representatives before the adoption is completed.

## Please provide the following information: Street Address City\_\_\_\_\_State\_\_\_\_Zip\_\_\_\_ Home Phone \_\_\_\_\_\_ Work Phone \_\_\_\_\_ If there is a specific FosterCat cat or kitten you are interested in, please enter its name here: How long have you lived at this address? (ie. 3yrs, 6mos) Do you live in a: □ House □ Apartment ☐ Mobile Home □ Other If you rent, we will need to verify that you are permitted to have pets. Please enter: Landlord's Name Landlord's Phone Number Landlord's Address Why do you want to adopt a companion animal? Have you ever adopted from FosterCat, Inc.? □ Yes □ No

Have you ever adopted from a shelter?
□ Yes □ No
If yes, shelter name
Date of Adoption
Please list the veterinary clinic you currently use:
Clinic Name
Veterinarian's Name
Clinic Phone
FosterCat routinely contacts applicants' veterinarians as part of our adoption screening process. Do we have your
permission to contact your veterinarian to verify your pet(s) health records and vaccination status?
□ Yes □ No
Do you plan to have your cat or kitten declawed?
□ Yes □ No
If yes, why?
Describe the declawing process.
Do you have animals at home?
□ Yes □ No
If yes, what kind of animals?
How many?
Have you been the caretaker for other animals in the past five years?
□ Yes □ No
If so, where are the animals now?
Are there children at home?
□ Yes □ No
If yes, ages of children
Are there other adults at home?
□ Yes □ No
Does everyone in the household want this cat/kitten?
□ Yes □ No
Is anyone in the household allergic to cats?
□ Yes □ No
Who will be primarily responsible for this cat/kitten?
How many hours are you away from home each day?

Will this cat/kitten be:
□ Indoors only □ Indoor/outdoor □ Outdoors only
Where will this cat/kitten stay?
□ During the day? □ At night?
Who will take care of this animal in your absence (i.e., vacation, emergencies)?
How long do you plan to provide a home for this animal?
How much do you think it will cost each month to provide necessary medical care and to cover the costs of feeding and caring for this pet?
Carring for this pet:
FosterCat, Inc. reserves the right to perform a home visit before and/or after adoption. Do you object to your visiting your
home now or some time in the future?
□ Yes □ No
Any false information may result in nullifying the adoption.
Signature
Date
Please mail to:
FosterCat, Inc
P.O. Box 23414
Pittsburgh PA 15222-6414

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