

# Cat Adoption

<p style="text-align: center; font-style: italic;">Office Use Only</p> <p>Cat's Name: _____</p> <p>Log #: _____</p> <p>Sex: _____</p> <p>Age: _____</p> <p>Breed: _____</p>	 <p style="font-weight: bold; margin: 0;">QUINTE HUMANE SOCIETY</p>	<p style="text-align: center; font-style: italic;">Office Use Only</p> <p><input type="checkbox"/> 24 Hour Hold    <input type="checkbox"/> Meet and Greet Required</p> <p><input type="checkbox"/> Spoken For        <input type="checkbox"/> Needs Cat Test</p> <p><input type="checkbox"/> Deposit Paid</p> <p>Surgery Date: _____</p> <p>Pick Up Date: _____</p>
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## Information ABOUT YOU and YOUR HOME

<p>Name(s): _____</p> <p>Address: _____</p> <p>City: _____ Postal Code: _____</p> <p>Home Phone: _____ Cell Phone: _____</p> <p>Email: _____</p> <p><i>Emergency Contact (Used for Microchip Registration)</i></p> <p>Name: _____ Phone #: _____</p>	<p><b>1: Total # of adults in the home:</b> _____</p> <p><b>2: Are there children in the home or that visit frequently?</b></p> <p><input type="checkbox"/> Yes            <input type="checkbox"/> No</p> <p><b>3: Total # of children:</b> _____</p> <p><b>4: Ages of children:</b> _____</p>
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**5: I want to adopt a cat for:**

Myself             Family in the same home             Someone else             A Surprise/Gift

<p><b>6: Are you 18 years old or older?</b></p> <p><input type="checkbox"/> Yes            <input type="checkbox"/> No</p>	<p><b>7: Do you live with your parent/guardian?</b></p> <p><input type="checkbox"/> Yes            <input type="checkbox"/> No</p> <p><i>If yes, please list their name(s) and phone number:</i> _____</p>	<p><b>8: Are you a student?</b></p> <p><input type="checkbox"/> Yes            <input type="checkbox"/> No</p> <p><i>If yes, what will you do with the animal after you are done with school?</i> _____</p>
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**9. Who will be responsible for the care and well-being of the cat?** \_\_\_\_\_

**10. Does anyone in the household have an allergy to cats?**     Yes     No

*If yes, how would you cope with adding this cat to your family?* \_\_\_\_\_

**11. What type of residence do you live at?**

House             Apartment             Townhouse             Condo             Mobile Home  
 Other \_\_\_\_\_

**12. Do you rent?**     Yes             No

*If yes, does your landlord/ rental agency allow pets?*     Yes             No

Please list your landlord's name and phone number: \_\_\_\_\_

**13. How long have you lived at your current address?** \_\_\_\_\_

<p><b>14: Will the cat be allowed outside?</b></p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Undecided</p>	<p><b>15: If the cat is allowed outside, it will be:</b></p> <p><input type="checkbox"/> Free to wander</p> <p><input type="checkbox"/> In a cat enclosure</p> <p><input type="checkbox"/> Leashed and harnessed</p>	<p><b>16: Where will the cat live:</b></p> <p><input type="checkbox"/> Inside the house</p> <p><input type="checkbox"/> Outside</p> <p><input type="checkbox"/> Garage</p> <p><input type="checkbox"/> Barn</p> <p><input type="checkbox"/> Basement</p> <p><input type="checkbox"/> Free Run</p> <p><input type="checkbox"/> Other _____</p>
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**17. Do you consent to a home check before adoption?**     Yes             No

<p><b>18: Have you ever adopted a pet from the Quinte Humane Society?</b></p> <p><input type="checkbox"/> Yes            <input type="checkbox"/> No</p>	<p><b>19: Have you ever surrendered an animal to an SPCA or animal rescue organization?</b></p> <p><input type="checkbox"/> Yes            <input type="checkbox"/> No</p>	<p><b>20: Have you or anyone in your household ever been investigated for cruelty to animals?</b></p> <p><input type="checkbox"/> Yes            <input type="checkbox"/> No</p>
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## Animal History Questionnaire

**21: Do you or have you ever owned a cat before?**

- Yes, I currently own a cat  
 Yes, I have owned a cat before  
 No, I have not owned a cat before

**22: Please list all the pets you have owned in the past and what happened to them:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**23: Please list all the pets you currently own, stating their species (cat/dog/ etc.), age, gender and if they are spayed or neutered:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**24: Have any of your past or present pets ever had a litter of puppies/kittens?**

- Yes  No

**25: Is your current animal(s) up to date on vaccinations?**

- Yes  No

**26: Do you have a veterinarian clinic you currently use?**

- Yes  No

*If yes, do you give the Quinte Humane Society permission to contact them for a reference and release of your animal's medical history?*

- Yes  No

**27: Name and phone number of Veterinarian Clinic:** \_\_\_\_\_

## About the Cat you'd like to Adopt

*In the following section, please check all boxes that apply to each question.*

**28: It is extremely important that my new cat:**

- |  |   |                                     |                                       |
|--|---|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Likes Dogs        | <input type="checkbox"/> Likes other Cats           | <input type="checkbox"/> Is Playful | <input type="checkbox"/> Is Calm      |
| <input type="checkbox"/> Likes Children    | <input type="checkbox"/> Is Friendly with Strangers | <input type="checkbox"/> Is Quiet   | <input type="checkbox"/> Is Energetic |
| <input type="checkbox"/> Enjoys being held | <input type="checkbox"/> Is independent             |                                     |                                       |
| <input type="checkbox"/> Other: _____      |   |                                     |                                       |

**29: Why would you like to adopt this cat?**

- |                                       |   |
|---------------------------------------|---|
| <input type="checkbox"/> Mouser       | <input type="checkbox"/> Companion to person      |
| <input type="checkbox"/> Barn cat     | <input type="checkbox"/> Companion to another pet |
| <input type="checkbox"/> For a child  | <input type="checkbox"/> Surprise/Gift            |
| <input type="checkbox"/> Breeding     |   |
| <input type="checkbox"/> Other: _____ |   |

**30: Would you ever return a cat for the following reasons?**

- |  |  |
|--|--|
| <input type="checkbox"/> Allergies     | <input type="checkbox"/> Not good with other pets      |
| <input type="checkbox"/> Moving        | <input type="checkbox"/> Not good with children        |
| <input type="checkbox"/> Too Energetic | <input type="checkbox"/> Failure to use the litter box |
| <input type="checkbox"/> Shedding      | <input type="checkbox"/> Scratching                    |
| <input type="checkbox"/> Other: _____  |  |

**31: Do you feel a cat is a lifetime commitment?**

- Yes  No

**32: Do you plan on declawing this cat?**

- Yes  No

**33: What kind of food do you plan on feeding?**  
\_\_\_\_\_  
\_\_\_\_\_

## Adopting an Unaltered Kitten:

**34: If adopting an unaltered kitten do you plan on letting him/her have a litter of kittens?**

- Yes  No

**35: If adopting an unaltered kitten do you plan on having it spayed/neutered?**

- Yes  No

**36: How much do you expect to spend on having your kitten spayed/neutered? \$** \_\_\_\_\_

**37: Will you be able to afford the cost of spaying/neutering within the next 2 to 4 months?**  Yes  No

- *I understand that QHS does not have a vet on staff and that the animal I am applying to adopt has not been examined by a veterinarian.*
- *I understand that deposits and adoption fees are non-refundable.*
- *I understand and consent that the Quinte Humane Society may inspect the animal and if the conditions under which it is kept are not considered satisfactory by the QHS, in its sole discretion may take repossession of the animal.*
- *I hereby state that all answers are truthful and understand that QHS reserves the right to decline any application at their own discretion.*

Applicant's Signature: \_\_\_\_\_

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

Office Use Only:

Name Check

Approved

110: \_\_\_\_\_

Staff's Signature: \_\_\_\_\_