



ADOPTION APPLICATION

We require proof of address. If your current photo ID does not have the correct address we will require a secondary item with the correct address. If you rent your home, please ensure you are allowed to have the type of pet you are applying for. Please check into size or breed restrictions before applying.

CLIENT INFORMATION

Have you adopted from the PSPCA before? Yes _____ No _____

Applicant Name: _____ Email Address: _____

Physical Address _____ Apt: _____

City _____ State _____ Zip _____

Home Phone: _____ Cell Phone: _____

As an adopter you are responsible for checking into additional security fees, insurance cost, etc. that you may become responsible for when adopting a pet. Do you accept that responsibility? _____

Names of adults in the house: _____

Is everyone comfortable with adopting an animal? _____

Do you have children living in the home? Yes _____ No _____ The ages? _____

Are there children that regularly stay at the home? (Partial custody?) _____

What are the ages? _____

Have the children been around the type of animal you are interested in adopting before? _____

Is anyone in the home allergic to animals? Yes _____ No _____ Unsure _____

Current Pet Information

<u>Name</u>	<u>Species</u>	<u>Age</u>	<u>Indoor/Outdoor</u>	<u>How long have you owned</u>	<u>Spayed/neutered</u>

Please fill this out as completely as possible

Do you currently have a veterinarian? If so who? _____

Are your pets up to date on vaccinations? _____

Are you financially willing and able to provide annual vaccinations, exams and routine medical care?
This is an annual commitment that could range from \$200 to \$400? _____

Please list any animals that are no longer with you and explain why. _____

Why are you looking for a new pet? _____

Are you familiar with crate training and are you willing to try it? _____

Have you ever brought a new pet into a home with an existing pet and if so, how did you do it? _____

Please check any behavior issues you have dealt with before

Resource guarding _____	Food Aggression _____	Leash Biting _____
Fear of Strangers _____	Pulling, jumping _____	Seperation Anxiety _____

How long will your new pet be outdoors? _____

Please check all ways the animal will be outdoors

Supervised in yard ____	Tethered or chained ____	Unattended in yard ____
Walked on leash _____	Guarding property ____	Walked on leash _____

Please list any animals you have surrendered to a shelter or animal control _____

Agreement:

By signing this form, I acknowledge that all information on this form is true and correct. I understand that any misrepresentation of the facts may result in the PSPCA refusing adoptions privileges to me. I authorize the PSPCA to contact all veterinarians listed on the application.

Signature: _____ Date: _____



The Advocate for Animals
SINCE 1867

CAT ADOPTER SURVEY

FIRST NAME:	LAST NAME:		DATE:	
ADDRESS:				APT #:
CITY:	STATE:	ZIP CODE:		
HOME PHONE:	CELL PHONE:	EMAIL:		
I have owned a cat before:	YES	NO		
I like a cat that prefers to live...	Inside	Outside		
My house is...	Library quiet	Both quiet and busy	Carnival crazy	
I want my cat to interact with house guests...	Rarely	Sometimes	Often	
I love a cat that's boisterous and gets into everything.	Yes	Maybe	No	
My cat needs to get along with... (circle all that apply)	Dogs	Cats	Birds	Other
My cat needs to get along with... (circle all that apply)	Children under 8.	Tweens	Teens	Elderly
My cat needs to be able to be alone (Per day)	4 hours or less	4-8 hours	Over 9 hours	12+ hours
I want a cat that will... (circle all that apply)	Nap in my lap	Enjoy being held	Play with toys	Be a loner
I like a cat that is talkative...	All of the time	Some of the time	Rarely	Never
It's most important that my cat _____				