



1755 Williams Dr  
 Stoughton, WI 53589  
 (608) 877-9630

## Application for ADOPTION of a CAT or KITTEN

In order to be considered for an adoption, you **MUST**:

- Be at least 18 years of age
- Have formal identification
- Have the consent of all adults living in the household
- Understand that we have the right to deny or accept any application

**PLEASE PRINT:**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address (No PO Box, please) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

Home phone (\_\_\_\_) \_\_\_\_\_ Work phone (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Do you live in a: House Apartment Condo Mobile Home Duplex Other \_\_\_\_\_

Do you (circle one): Rent Own Live at parents' or relatives' home

Landlord name and phone number \_\_\_\_\_

Condo association name and phone number \_\_\_\_\_

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Is this your first experience with a cat? Yes No First experience with a kitten? Yes No

I prefer a cat that:

Has claws Has front paws declawed Has all four paws declawed I intend to declaw

What animals are currently in your household?

Name	Type	Age	Sex	Altered?	Where is the animal kept?

Are all the animals you have now up-to-date on their rabies and distemper vaccinations? Yes No

How many hours in a day will the pet spend alone? \_\_\_\_\_

Have you ever had to give up an animal? No Yes (please explain the circumstances) \_\_\_\_\_

How did you hear about Country Animal Haven? \_\_\_\_\_

Are you familiar with the licensing requirements in your community? Yes No

How much time per day can you spend playing with and interacting with this cat? \_\_\_\_\_

Do you have a scratching post? Yes No

Do you have a litter box, litter, food, and toys ready for this cat? \_\_\_\_\_

Should medical or behavioral problems occur, are you willing to work with and for your pet to the best of your ability, to correct or treat the concern? Yes No Uncertain

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By signing below, I certify that the information I have given is true, and I realize that any misrepresentation of facts may result in my losing the privilege of adopting a pet. I understand that Country Animal Haven, Inc., has the right to deny my request to adopt an animal for any situation that would be contrary to the organization's adoption policies, in violation of any state or local ordinances, or not in the best interest of the animal, as determined by Country Animal Haven, Inc. I authorize investigation of all statements in this application. I also authorize my veterinarian to release any information requested by Country Animal Haven, Inc.

Signature \_\_\_\_\_ Date \_\_\_\_\_