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<u>fosterandforever@gmail.com</u> <u>www.fosterandforever.org</u>

## **Application to Adopt a CAT**

Submitting an application directly on our website is the preferred & quickest method to send us an application. If you must use this paper version, scan it then email it to us. Do not take a picture of it and send it by a text message. Sending it via the US Post Office will delay our processing the application, it can be lost in the mail and we do not check our Post Office Box on a regular basis.

## \* Required Information

<u>PLEASE NOTE</u>: For the Safety of our Furbabies & Adopter's Children We Do Not Adopt Out to Families with Children Under Five Years of Age

## Applicant: Name\*: Date: Home Phone\*: Work Phone: Cell Phone: Email Address\*: Home Address\*: City\*: State\*: Zip Code: Date of Birth\*: Name of cat you would like to adopt\*: Have you ever been convicted of a felony or YES NO **Explain if YES** misdemeanor associated with animal abuse and/or neglect?\*: What is your Spouse/Partner occupation? occupation/employer\*? Who do you Spouse/Partner Alone **Parents** Roommate live with\*: What are your current living House Apartment Condo Mobile Home arrangements? How long have you lived at this address? How long do you plan to live at this address? Do rent or own\*? Rent Own Please be sure to attach a copy of your lease agreement or condo documents or written approval from your landlord. Showing that pets are allowed if you rent. Renters-Please provide contact information for your landlord\*: Name: Phone Number: Address: Zip Code: State: In what type of setting is your home located? Urban Suburban Rural

| Name of Veteri                       | narian y                                | ou will use for th | nis Cat: |  |        |              |        |  |                |       |    |
|--------------------------------------|---|--------------------|----------|--|--------|--------------|--------|--|----------------|-------|----|
| Address:                             |   |                    |          |  |        |              |        |  | Pho            | ne #: |    |
| City:                                |   |                    | State:   |  |        |              | Zi     | p Code:  | I              |       |    |
|                                      | ly own a                                | ny other pets or   |          | ere any  | othe   | r pets livir |        | •  | Yes            |       | No |
| ,                                    |   | Type of            |          |  |        |              | Ĭ      | <u>,                                      </u> |                | Indo  | or |
| Pet Names                            | s                                       | animal/breed       | Age      | Gen  | der    | Altered      | ŀ      | Declawed                                       | Indoor/Outdoor |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  | 1      |              |        |  | · I            |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   | Please list        | below    | how t  | hese p | ets were     | acqu   | iired:   |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
| P                                    | lease Li                                | st Vaccine statu   | s and e  | vnirati  | on da  | te for eac   | h net  | living in th                                   | e home:        |       |    |
|                                      | icase Li                                | or vaccine state.  | J and C  | хрп ас.  | on da  | te for eac   | iii pe |  | e monne.       |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
| If you own a cat                     | t, how d                                | loes it get along  | with ot  | her cat  | :s?    |              |        |  |                |       |    |
| If you currently                     | own a d                                 | dog, how does it   | get alo  | ng wit   | h Cats | ?            |        |  |                |       |    |
|                                      | W                                       | Vhat Veterinaria   | n are y  | ou cur   | rently | using for    | thes   | e pets?  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
| Name:                                |   | Challa             |          | Addre  |        |              | Τ.     | 21   |                |       |    |
| City:                                |   | State:             |          | Zip Co   | oae:   |              |        | Phone #:                                       |                |       |    |
|                                      |   | the veterinary re  |          | ا م برم  | thoro  | nimals*      | Voc    |  | No             |       |    |
| Other than you                       | rcurren                                 | t pets, have you   |          |  |        |              | Yes    | \A/*   | No             |       |    |
| Breed Gender Number of years you had |   |                    |          | t the information below:  Please Specify what happened |        |              |        |  |                |       |    |
| Dieeu G                              | CHUEI                                   | indiffice of year  | ara you  | iiau   |        | FIE          | ase s  | PECHY WHAL                                     | парреп         | cu    |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
|                                      |   |                    |          |  |        |              |        |  |                |       |    |
| How many Adul                        | How many Adults in your home (Including |                    |          |  | Ages'  | *:           |        |  |                |       |    |
| yourself)*:                          | ,                                       | (                  | J        |  | 0.55   |              |        |  |                |       |    |
| How many Children in your home*:     |   |                    |          | Ages'  | *:     |              |        |  |                |       |    |

| Does anyone have allergies to animals in your   | Yes                                     | No               |            |      |  |
|---|---|------------------|------------|------|--|
| Does anyone in your home have asthma?   | Yes                                     | No               |            |      |  |
| What is the ac  | ctivity level of your house             | ehold:           |            |      |  |
| Quiet Moderate  |   | ery Active       | Ot         | her  |  |
| Who will be responsible for taking care of the  |   | ,                |            |      |  |
|   |   |                  |            |      |  |
| What is your experience with cats- Please des   | scribe below:                           |                  |            |      |  |
| , ,   |   |                  |            |      |  |
|   |   |                  |            |      |  |
| The pet may live 15+ years, what would you o  | lo with your pet if you co              | uld no longer ca | re for the | pet* |  |
| , , , , , , , , , , , ,   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                  |            |      |  |
|   |   |                  |            |      |  |
|   |   |                  |            |      |  |
|   |   |                  |            |      |  |
| If you have children, Please describ  | e their experience with o               | ats-Please desc  | ribe belov | v:   |  |
|   |   |                  |            |      |  |
|   |   |                  |            |      |  |
|   |   |                  |            |      |  |
|   |   |                  |            |      |  |
| Do children visit your home often?  |   | Yes              | No         |      |  |
| If Yes- Please list their ages:   |   | 1.03             | 1.10       |      |  |
| Is anyone home during the day?  |   | Yes              | No         |      |  |
| If Yes, who?  |   | 163              | 110        |      |  |
| If No, how many hours will the cat be left alo  | ne?                                     |                  |            |      |  |
| How often do you travel?  | Who will care for pet wh                | nile vou're away | ?          |      |  |
| Why are you adopting a cat*   | Willo Will care for pet Wi              | ine you're away  | •          |      |  |
| Who is the cat for*   |   |                  |            |      |  |
| Where will the cat be kept during the day?  |   |                  |            |      |  |
| Where will the cat be kept at night*  |   |                  |            |      |  |
| Where will the cat sleep*   |   |                  |            |      |  |
| Will the cat be allowed Outdoors*   |   |                  |            |      |  |
|   |   |                  |            |      |  |
| If YES, under what circumstances?  Do you plan on DE-Clawing your cat*                      |   |                  |            |      |  |
| Please describe the DE-Clawing procedure:   |   |                  |            |      |  |
| Please describe the DE-Clawing procedure.   |   |                  |            |      |  |
| Are you now or have you ever experienced be   | shavior/training problems               | s with a not?    | Voc        | No   |  |
| Are you now or have you ever experienced behavior/training problems with a pet? Yes No      |   |                  |            |      |  |
| If Yes, please explain the issues and how they were resolved-below:                         |   |                  |            |      |  |
|   |   |                  |            |      |  |
|   |   |                  |            |      |  |
| NA/hat will you do if your act is doctorative?  |   |                  |            |      |  |
| What will you do if your cat is destructive?  |   |                  |            |      |  |
| What is your definition of disciplining a cat- Please provide examples below                |   |                  |            |      |  |
|   |   |                  |            |      |  |
|   |   |                  |            |      |  |
|   | 6 1                                     |                  | 1,,        | 1    |  |
| Have you ever surrendered a pet or had a pet for a short time that didn't work out?  Yes No |   |                  |            |      |  |
| If Yes, please explain the circumstances:   |   |                  |            |      |  |

| If for any reason, you can't keep a Foster and Forever adopted cat, do you agree to        | Yes      | No       |
|--|----------|----------|
| return it to Foster and Forever?   |          |          |
| Are you willing to have an initial in-home visit or follow up visit by a representative of | Yes      | No       |
| Foster and Forever, if Foster and Forever deems it necessary?                              |          |          |
| Are you willing to seek and begin immediate training if behavioral issues arise within     | Yes      | No       |
| days of taking ownership?  |          |          |
| Are you willing and able to accept full and immediate responsibility for the ownership     | Yes      | No       |
| of a cat, including all health care costs and necessary burdens and responsibilities of    |          |          |
| owning a cat?  |          |          |
| If No, why?  |          |          |
|  |          |          |
| How did you hear about Foster and Forever Pet Rescue?                                      |          |          |
|  |          |          |
|  |          |          |
| Please Note: Foster and Forever reserves the right to approve or deny any application      | accordin | g to our |
| adoution policies and in any bast offerts to find good houses for the long town well be    |          | _        |

Please Note: Foster and Forever reserves the right to approve or deny any application according to our adoption policies and in our best efforts to find good homes for the long term well -being of our animals.

By signing below; I affirm that I am at least 21 years of age and have answered the above questions completely and truthfully. I give permission for Foster and Forever to contact the landlord, veterinary, and personal references I have provided and I give permission for these references to release any information they deem relevant to the adoption of an animal(s) from Foster and Forever.

| ,          | <br>· ' |       |
|------------|---------|-------|
| Signature: |         | Date: |
|            |         |       |

## Please list two (2) references who are not family members-below:

| Name:                                  | Home Phone: | Work Phone:   | Cell Phone: | Relationship: |  |  |  |  |  |
|--|-------------|---------------|-------------|---------------|--|--|--|--|--|
| Name:                                  | Home Phone: | Work Phone:   | Cell Phone: | Relationship: |  |  |  |  |  |
| Please provide a veterinary reference: |             |               |             |               |  |  |  |  |  |
| Name:                                  |             | Phone Number: |             |               |  |  |  |  |  |
| Address:                               |             |               |             |               |  |  |  |  |  |
| City:                                  |             | State:        | Zip Code:   |               |  |  |  |  |  |

Adoption fees include Spay/Neuter Surgery, Age appropriate routine vaccinations, De-worming medication, Feline Leukemia testing for cats, and Flea/Tick/Ear Mite preventive treatment for all animals.

Thank you for considering adopting your next animal(s) from Foster and Forever Pet Rescue