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BTHAR CAT ADOPTION APPLICATION

Let's get started:

Name of cat I'm interested in _____

Is this your first time owning a cat/kitten? Y _____ N _____

Why do you want to adopt a cat/kitten? _____

Tell us about yourself:

First Name _____ Last Name _____

Street Address _____ City _____

State _____ Zip _____ Apt # _____

Primary Phone _____ Alt Phone _____

Email _____ DOB _____

Employer _____ (*please list retired if so)

How long have you lived at your current address? _____

Below, please list name, relationship, age, of all others who reside in your home:

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Please list any other family members living with you here:

Does anyone in your home have allergies to cats? Y _____ N _____

Are they on medication for it? Y _____ N _____ N/A _____

Have you adopted an animal from a shelter before? Y _____ N _____



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Have you applied to/adopted from BTHAR before? Y_____ N_____

Have you ever surrendered a pet to a shelter? Y_____ N_____

If yes, why? _____

Do all members of your house agree to adopting? Y_____ N_____

Do you own your home? _____ Rent? _____

For each pet CURRENTLY in your home please list the following:

Pet's name / Species (dog, cat, etc.) / Breed (pit, lab, etc.) / Spayed/Neutered? (yes or no) / Age / Years Owned (eg. 2012-now)

Pet 1 _____

Pet 2 _____

Pet 3 _____

Pet 4 _____

For each pet you have PREVIOUSLY owned, please list the following:

Pet's name / Species (dog, cat, etc.) / Breed (pit, lab, etc.) / Spayed/Neutered or not? / Age / Years Owned (eg. 1995-2001) / Why don't you have them anymore?

Pet 1 _____

Pet 2 _____

Pet 3 _____

Pet 4 _____

Veterinary practice used: *

Please provide a name and phone number of the veterinarian you see for current pets AND previous pets you have owned. You may list more than one. If this is your first time owning a pet please list the vet you plan to use.



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Where will your new cat live? _____

What do you plan to do/use for your new cats scratching needs? _____

How long do you expect to own this cat? _____

How long (on average) will the cat be left at home alone? _____

Who do you plan on having watch your cat when gone for extended periods of time?

Do you have the financial means to provide for all of your cats needs? (vet care, food, toys, litter, etc) _____

PLEASE READ THE FOLLOWING ITEMS TO INDICATE YOUR AGREEMENT.

I am adopting this pet to be part of my family, and I am allowed to have these pet(s) in my home. The information I have provided on this application is true to the best of my knowledge. I understand that if I willfully provide false information, my application may be denied.

Signature _____

Date _____