



CAT ADOPTION APPLICATION

Outreach to Pets In Need, Inc. (“OPIN”)

A 501(c)(3) not-for-profit, all-volunteer-run corporation

Adopt@OPINpets.org www.OPINpets.org

We reserve the right to approve or deny any adoption.

DATE _____ TIME _____ Name of CAT: _____

To adopt, you must:

___ be at least 21 years old

___ have the knowledge and consent of all adults living in your home

___ be able & willing to spend the time & money needed to provide the cat with proper care & vet treatment

___ be able & willing to make a non-refundable donation of \$125 to OPIN for the cat adoption.

Completion of this application doesn't guarantee adoption approval. Please print legibly and clearly and complete all pages. Thank you!

Name of applicant _____ Birth date _____

Spouse/partner/roommate _____

Address _____

City _____ State _____ ZIP _____

Tel #: Home _____ Work _____ Cell _____

E-mail address: _____

Applicant's place of employment _____ Occupation _____

Spouse/partner's place of employment _____ Occupation _____

Hours applicant works per day _____ From _____ a.m. / p.m. To _____ a.m. / p.m.

Hours spouse/partner works per day _____ From _____ a.m. / p.m. To _____ a.m. / p.m.

How many adults are in your home? _____ How many children? _____ Ages: _____

How does your spouse/partner feel about adopting this cat? _____

Is any household member allergic to animals? _____ If yes, how will you deal with reactions to this pet?

Do you have any dogs? _____ If yes, how many? _____ Have they lived with a cat before? _____

Where did you hear about OPIN and the pet or adoption? _____

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

Why did you choose this particular breed/mix of cat? _____

Will the adopted cat be: Indoor only _____ Outdoor only _____ Indoor/outdoor _____

Have you ever owned a cat? YES _____ NO _____ If yes, do you still have it? _____

If not, what happened to the cat? _____

Have you ever given a pet to a shelter or to someone else? Yes ____ No ____ If yes, please explain:

Have you ever had a pet euthanized? Yes _____ No _____ If yes, please explain: _____

Have you ever owned a declawed cat, or had a cat declawed? _____ If yes, give the reason: _____

Would you ever declaw the cat/kitten you want to adopt (if not declawed upon adoption)? _____

If yes, under what circumstances? _____

Have you ever been investigated for animal neglect or cruelty? _____ If yes, why? _____

Are you familiar with local animal control laws? _____

The cost of caring for a cat properly can exceed \$1,000/year. This includes annual vaccinations, regular veterinary checkups, cat supplies, possible training and/or boarding, good-quality food and unforeseen medical expenses.

Are you FINANCIALLY ABLE to spend this kind of money on this cat if required? _____

Are you COMMITTED to spend this kind of money on this cat if required? _____

Cats can live 15 years or longer. Can you commit to caring for this pet for that long? _____

Will you give all required medical care necessary for the life time of this pet? Yes ____ No ____

What provisions will you make for the cat should you become unable to care for him/her? _____

Under what circumstances would you give up the cat? _____

What will you do with the cat if you have to move? _____

What will you do with the cat if you have a baby? _____

Will you work out bad habits (scratching, biting, house-soiling, etc.) the cat may have? _____

If yes, how are you planning on dealing with any bad habit? On your own ____ Hiring a trainer _____

If you go away for a few days, or on a vacation, who will take care of the cat? _____

Are you willing to take responsibility for this cat for the next 15 years or more? Yes _____ No _____

If no, explain: _____

Do you own or rent your home? _____ How long have you lived at your current address? _____

Do you live in a: House ____ Apartment ____ Condo ____ Townhouse ____ Other ____ (explain)

If you rent, provide name and telephone number of your landlord - (REQUIRED)

Name: _____ Telephone: _____

If you rent, please show us the part of your lease where you are allowed to have pets, the number allowed and any limitation in size weight, if any. If pets are not mentioned in your lease, please ask us for the "Permission to Have Pets" form and have it signed by your landlord and fax it to us.

If you own, you must provide proof of ownership by a copy of your Real Estate Tax Bill, or by showing us your mortgage prior to paying adoption fees. Owners of condos or townhouses must also provide a copy of the condo association's by-laws indicating pets are allowed, the number allowed and any limitations in size or weight, if any.

Please provide references of two people (not in your family) who have known you 5 years or more:

Personal Reference: _____ Phone # _____

Personal Reference: _____ Phone # _____

Present and Former Veterinarians

Name of your PRESENT Veterinarian & Hospital: _____

City and phone number (Present Vet): _____

Name your pet records are under at your present vet (if different than applicant): _____

Name of your FORMER Veterinarian & Hospital: _____

City and phone number (Former Vet): _____

Name your pet records are under at your former vet (if different than applicant): _____

Give us information about all the animals alive and currently living in your household:

Name of Pet	Dog/Cat/ Other	Breed	Sex	Spayed / Neutered?	Age	Weight	Vacci- nated?	Dog- licensed?

Give us information about the last 3 animals that you no longer have (deceased or otherwise):

Name of Pet	Dog/Cat/ Other	Breed	Sex	What happened to pet? If dead, how did it die?	If dead, age at death	Date of death or surrender

Additional comments from applicant: _____

PLEASE READ CAREFULLY BEFORE SIGNING

FEES: There is **\$125.00 non-refundable adoption donation to be paid by cash or check**. This donation goes towards off-setting the cost of the spay/neuter surgery, vaccination, micro-chipping, and boarding costs. All donations above this amount are very welcome, and greatly appreciated, as our costs per pet are greater than the adoption fee. In addition, we rely on donations to be able to save the next pet in need.

HOME VISITS: OPIN may choose to perform both pre-adoption and post-adoption home visits.

USE OF CAT: You agree that the cat will be adopted as a house pet and companion only. OPIN reserves the right to reclaim the cat if it feels the dog is not being fed, housed or cared for to its satisfaction. If you are unable to care for this cat, he/she must be returned to OPIN.

COPY OF DRIVER'S LICENSE (or other form of official ID) IS REQUIRED

This application is designed to help us determine if the adoption is in the cat's best interest, and to assist you in finding a pet compatible with your lifestyle. An unwise adoption can result in an unpleasant experience for adoptive families and may ruin the pet for further adoptions. We hope you will agree that the pet's welfare must be our foremost concern.

I understand the above questions and I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts is cause for denial of adoption. By signing this application, I am stating that the above mentioned is true.

Your Signature _____ Date: _____

For OPIN use only:

Final comments: _____

_____ Approved _____ Denied By _____ Date _____