

## **CAT ADOPTION APPLICATION**

Name:	Name of Cat:	
Phone Number:	Date of Birth:	
Email Address:	<u> </u>	
Physical Address, City, State, Zip Code:		
	dress):	
Do you own or rent?	Landlord's Number:	
Do you have children?	Children's Ages:	
Are you aware that you are responsible to su	pervise interactions between pets and children?	
	ach your children humane treatment of animals	
Do you have other pets?	<del> </del>	
Please list all pets you have had in the past fi	ve years (name, age, species, gender)	
Pet 1		
Pet 2		
Pet 3		
Pet 4		
Pet 5		

Pet 6				
Are there pets you no longer have? Please explain. If deceased, please list cause of death.				
Who provides your veterinary care?				
Veterinarian's phone number:(We will contact your vet to confirm your of	current animals have received regular care.)			
Where will your cat be kept during the da	y? In the evening?			
Reason for adopting?				
How long will your cat be home alone each day without human companionship?				
Will your cat be allowed on the furniture?				
Please describe your ideal cat:				
Do you plan to have a litter box inside? _	<del></del>			
Do you plan to let your cat outside?				
How will you introduce your new cat to ot	her animals in your home?			
What is your plan if your new cat and cur	rent animals do not get along?			
Where did you hear about us?				
misrepresentation of facts may result in nunderstand that The Ark has the right to opet is not "first come, first serve," as The best possible fit. I authorize investigation	ation I have given is true, and I recognize that any my losing the privilege of adopting a pet. I deny my application. I understand that adopting a Ark places animals in adoptive homes that are the of all statements in this application. I understand a period to verify the facts in this statement.			
Applicant's Signature:	Date:			
Ark Agent:				

Approved:	Denied:	Reason for denial:	