



CAT ADOPTION APPLICATION

Thank you for your interest in providing a forever home to an animal in need from Patches Place Cat Rescue, a non-profit organization (hereafter referred to as "PPCR").

The first step in the process of adopting a cat from PPCR is to complete this application. The application provides us with important information and allows us to work with you to determine if the adoption is in the pet's best interest. Our adoption fee includes the cost for vaccinations and other medical care and the spaying or neutering of the animal.

Name of Cat Desired: _____ Or Type Desired: _____

Potential Adopter Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

What type of household do you live in? (house, apartment, condo) _____

Do you Own or Rent? _____

If renting, please provide landlord information so we can confirm having a cat is acceptable in your household.

Landlord's name _____ Landlord's phone _____

Where will the cat live? Indoors Only Outdoors Only Indoors and Outdoors

Do you plan to declaw the cat? Yes No

We recommend all other animals in your home be up to date on vaccinations.

Please list all of your current pets.

Dog or Cat	Breed	Age	M/F	Neutered/Spayed	How Long Owned



Additional space to list pets if needed:

Have you had other dogs/cats not listed above? Yes No

If yes, what happened to them? _____

How would you describe your level of experience with cats? _____

Who will be the primary caretaker of your animal? _____

Please provide **three** personal references (non-family members) in which you give permission for a PPCR representative to call:

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Name & Address of your Veterinarian: _____

Please tell us anything else you would like us to know to help match you up with the right forever animal:

I certify that all statements made by me on this adoption application are true and correct and understand that PPCR reserves the right to refuse adoption to anyone. PPCR will not adopt to persons who mislead or fail to provide accurate information on this application. By signing this application, I give PPCR permission to verify my information & contact the references I have given.

POTENTIAL ADOPTER'S SIGNATURE

POTENTIAL ADOPTER'S SPOUSE/PARTNER SIGNATURE

TODAY'S DATE: _____

Please print and fill out this application and bring it with you when you come for a visit.

