

cruelty prevention
public pet education
animal rescue & adoptions
the "big fix" spay/neuter program
"kibbles on wheels" food program



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CAT ADOPTION APPLICATION FORM

PLEASE PRINT

Name of Animal: _____ Date: _____

Name of Applicant: Mr./Mrs./Ms. _____

Physical Address: _____

Mailing Address: _____

City, ST, Zip: _____

Daytime Tel.: _____ Cell: _____

D/L or ID #: _____ Email: _____

Circle One: M F Date of Birth (Optional): _____

HS/SPCA reserves the right to deny anyone to adopt a cat/kitten without explanation. Even if I am applying for a certain cat, I understand that cats are adopted to the best match and not first come, first served. My application may still be approved but may be better suited to another cat.

During the seven (7) day period from the date of adoption, HS/SPCA may refund the adoption fee for a returned animal. In no case will HS/SPCA refund other expenses incurred on behalf of the animal.

Questionnaire:

1. Is this your: ___ Year-round ___ Seasonal ___ Vacation Home Date Leaving: _____

2. How long have you lived at this address? _____

If less than 2 years, list your previous address

3. Will this pet live with you at your current address? ___ Yes ___ No If "No," where?

4. Do you: _____ Own this Home _____ Rent this Home _____ Live with your parents?

Type of home: _____ House _____ Apartment _____ Duplex _____ Villa

____ Mobile Home: Rent Lot Y/N _____ Condominium _____ Townhouse

5. List all adults in home:

Ages of all children:

6. Does anyone in the home have animal allergies? _____ Yes _____ No

7. What are your reasons for adopting a pet? _____ Companion _____ Children _____ Gift
Other reason, please explain:

8. What are you looking for in a cat:

Age: _____ Gender: _____ Color: _____

Personality: _____

9. This animal will live: indoors/outdoors/both

10. Do you have any pets now? _____ If yes, list the types & individual names:

11. Are these pets' vaccinations current? _____

If not, why not? _____

12. How many dogs &/or cats have you had in the last 5 years?

What happened to them?

13. Have you ever had a cat declawed in the past? _____

14. Do you plan to declaw your cat? Yes _____ No _____

15. Please list your current veterinarian or one you have used in the last 5 years:

Veterinarian's Name: _____

Phone #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

16. Provide two (2) **non-related** references if you do not have a veterinarian:

A) Name: _____

Phone #: _____ Relationship to you: _____

B) Name: _____

Phone #: _____ Relationship to you: _____

17. If you should move, what would you do with this pet?

18. A pet may live many years. Preventive veterinary care can cost \$200.00 per year and up. This includes booster vaccines and being kept free of intestinal parasites, fleas and ticks. Veterinary care in case of illness or accident can be costly. Some shelter pets have unknown health backgrounds and behaviors. HS/SPCA makes no guarantee as to the age, breed, health or temperament of any animal offered for adoption. HS/SPCA recommends that you take your new pet to a veterinarian within 7 days.

Are you prepared to give the love your new pet needs and to assume its financial, training or retraining responsibilities? _____ Yes _____ No

19. Are you familiar with your local Animal Ordinances including licensing and vaccination requirements? _____ Yes _____ No

20. Have you ever been refused adoption of a pet by HS/SPCA or any other organization? _____

21. Have you ever been cited by Animal Services? _____

22. Have you ever turned a pet into an animal shelter? _____ Yes _____ No

If you answered yes to any of 20-22, please explain:

23. Where did you first learn of the Humane Society/SPCA of Sumter County, Inc.?

Signature of Applicant: _____

Print Name: _____

Date: _____

