The Cats' Cradle Adoption Application

Name:	Age:
Address:	
	ail:
About Your Home 1. Do you: □Own □Rent □Live with Pare	nts Other:
2. If you rent or live in a condo, does your la	ndlord/association allow pets?
Name of landlord/Association:	Phone Number:
3. How long have you lived at this address?	
4. How many times have you moved in the la	ast 5 years?
5. What would you do if you had to move to	a place that didn't allow cats?

About Your Family

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1. List everyone who lives in your household:

Name	Relation to you	Age	

- 2. Are all members of your household in agreement about getting a cat?
- 3. Do any members of your household have asthma or are allergic to animals?
- 4. Who will be the primary caregiver of the cat?
- 5. Who will be financially responsible for the cat?_

Do they have sufficient income for food and veterinarian care?

6. How will you take care of your cat when you're away?_____

About Your Current Pets

Name	Species/Breed	Age	Gender	Spayed/ Neutered?	Had how long?	Up to date on vaccines?

- 1. If you have a cat, is it: \Box indoor/outdoor \Box outdoor only \Box indoor only
- 2. Have you ever turned a pet into a shelter/pound/animal control? Explain
- 3. Have you ever had a pet euthenized?_____ Explain
- 4. Have you ever had a pet lost or stolen?_____ Explain
- 5. Have you ever had a pet give birth?
- 6. Have you ever had a pet for a short period of time and it not work out? Explain
- 7. If you have a dog, does it get along with cats?
- 8. Do any of your pets have any behavior or health problems? Explain
- 9. Do you have a dog door or cat door? Where does it lead to?

Pet History - Pets owned in last 10 years:

Species/Breed	Spayed/ Neutered?	Owned how long?	What happened to this pet?	How long ago?	Name of Vet Used

Plans For Your New Pet

1. Will the cat live: \Box indoors only	☐ indoors/outdoors	\Box outdoors only
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- 2. What restrictions will you put on your new cat?
- 3. How long do you plan to give your new cat to adjust to your home?
- 4. Under what circumstances would you give up your cat?_____

Signature: Date: