

# Forest Hill Friends



HELPING  
NEIGHBORHOOD  
KITTIES

EIN 82-4922773

## CAT ADOPTION APPLICATION

Date of Application \_\_\_\_\_

Animal's Name \_\_\_\_\_ Description \_\_\_\_\_

### APPLICANT INFORMATION

**PLEASE ANSWER COMPLETELY, DO NOT LEAVE ITEMS BLANK. USE BACK OF FORM IF NECESSARY.**

Name \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Home Tel \_\_\_\_\_ Mobile Tel \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

# of Children in Home \_\_\_\_\_ Ages \_\_\_\_\_ # of Adults in Home \_\_\_\_\_

Employer Name \_\_\_\_\_ Phone \_\_\_\_\_

Type of Housing  Apt.  Condo  Duplex  House  Other \_\_\_\_\_

Do you  Rent  Own  Other \_\_\_\_\_ # yrs there & future plans? \_\_\_\_\_

If Rental, Landlord's Name \_\_\_\_\_ Phone \_\_\_\_\_

Are animals permitted?  No  Yes (*Copy of lease may be requested*)

How long/where will the animal be left alone per day? \_\_\_\_\_

What animals do you have now?  dogs  cats  other \_\_\_\_\_

List their names, ages, and if spay/neutered \_\_\_\_\_

Type of food fed? Brand? Wet? Dry? \_\_\_\_\_

Have you had animals in the past?  No  Yes If yes, what happened to them? \_\_\_\_\_

Will your new pet be kept  100% inside?  Outside?  Both? \_\_\_\_\_

Do you declaw your cats?  No  Yes Have you ever had a declawed cat?  No  Yes

Is any member of the household allergic to animals?  No  Yes Does anyone have asthma?  No  Yes

Does a family member have a fear of animals?  No  Yes

If you travel, what arrangements are made? \_\_\_\_\_

**PAST PET HISTORY IS NECESSARY FOR US TO CONSIDER YOU FOR ADOPTION— USE BACK OF FORM IF NECESSARY.**

Veterinarian's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Have you ever given a pet up?  No  Yes To Whom? \_\_\_\_\_

Please explain \_\_\_\_\_

A cat can live 15–20 years. Are you financially prepared and willing to give this cat the recommended medical care it requires for its lifetime?  No  Yes

*There is an adoption fee of \$200, which includes all medical care to date.*