Complete form, save and email to

gurrsandpurrsrescue@gmail.com

GURRS AND PURRS

CAT ADOPTION APPLICATION

Trisha Ford, President: 626-534-5344

Email to: Gurrsandpurrsrescue@gmail.com

Cat you're interested in: _____ and _____

Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Home Phone: _____ Cell Phone: _____

Business Phone: _____ Email Address: _____

Occupation: _____

1. Why are you looking to adopt a CAT? _____

2. Why do you want a CAT (Why certain breed)? _____

3. Have you ever owned a CAT before? _____ Do you still have that cat? _____

What happened to your last cat? _____

4. Please list all the pets you have had in the past or currently have in your care:

Name	Type/Species	Age	Spayed/Neutered	Where Obtained	Current Status

5. At any time: Have you lost a pet (not through death)? _____ Have you had a pet poisoned? _____ Have you had an animal killed by a vehicle? _____ Have you had an animal die due to disease? _____ Have you ever given up a cat or other pet before? _____ If YES, please explain:

_____

_____

6. For what purpose do you want this cat? _____

7. Do you currently have any other animals? _____ List type, age and sex and if sterilized:

_____

_____

8. Do you have children at home? Number: _____ Age(s): _____

9. What type of residence do you have? Home: ____ Apartment: ___ Condo: ___ Mobile Home: ___

10. Do you rent or own? _____ How long have you lived there? _____

11. If you rent, do you have the landlord's permission to keep a cat? _____

Landlord's Name: _____ Phone: _____

12. Do you have a yard? _____ Is it fenced? _____ What type of fencing? _____
Height: _____

13. Do all family adults work? _____ How many hours per day will the pet be home alone? _____
Who will be the cat's primary caregiver? _____

14. In what areas of the home will the cat be allowed? _____

15. Where will you keep the litterbox? _____ Where will the cat sleep at night? Cat bed ___ Garage ___ My bedroom ___ Anywhere s/he wants ____ Other _____

Please explain answers: _____

16. What will you do if the cat claws drapes, furniture, etc? _____

17. Do you plan to declaw this cat? Yes ___ No ___ Why _____

18. Have you ever declawed a cat? _____

19. Do you intend to keep this cat primarily indoors ___ or outdoors ___ Both if allowed outside _____

Anytime _____ Daytime only _____ Nighttime _____ Only under supervision _____ On a leash _____

On a balcony/patio only ____ Only when the cat is older ____ Only if I move to a house or other location

_____ If Both, how much time will your cat be indoors? _____ Outdoors? _____

20. Will you feed your cat wet food? _____ Dry food? _____ Both? _____

21. What will you use for flea control? Flea spray ____ Flea comb ____ Frontline ____ Advantage _____

Revolution _____ Other (Specify) _____

22. What will you do with your cat if you go on vacation? _____ If you move to a no pet building? _____ If a new partner is allergic to cats? _____ If you get married/divorced? _____ If you move locally? _____

Out of state? _____

23. Under what circumstances would you not be able to keep this cat? (Please check all that apply)

Pregnancy/baby ___ Divorce/Separation ___ Spouse/child allergic ____ Needs too much attention ____

Job change/loss __ New house/apartment ___ Scratches drapes/furniture ___ Behavioral problems ___

Expensive vet bills ___ Conflicts with other pets ___ Sprays/litter box problems ___ Needs special diet ___ Cat becomes disabled ___ Requires daily treatment ___ Other _____

24. Have you tried to adopt a cat in the past? Yes _____ No _____

25. Are other members of your household aware that you are considering adopting a pet? _____
_____

26. Are you prepared to assume the financial responsibilities of caring for an animal, including inoculations, veterinarian care, good quality food, licensing, etc.? _____ Is there a limit? _____ How much do you feel would be too much? _____

27. What plans will you make for your CAT, should he or she outlive you, to assure it won't end up in a shelter?

_____

28. Who will take care of your cat should it outlive you? Name: _____ Phone: _____

29. Are you planning to move in the near future? _____

30. Is anyone in your house allergic to animals? _____

31. Are you familiar with the animal regulations in your area? _____

32. Do you understand that any cat you may adopt through GURRS AND PURRS will be sterilized? ____

33. What circumstances, in your mind, justify getting rid of a cat? _____

34. Are you willing to allow a Rescue Representative member to visit your home by appointment? ____

35. How did you hear about GURRS AND PURRS? _____

36. Do you accept that there will be a $150 donation fee (plus your monthly expenses) for the adopted cat? _____

NOTE -- Do you love Senior pets? _____ Ask about our Senior discounts.

37. Please list your current or past Veterinarian that you have used or still use: _____

38. Please list a reference and phone number: _____

I agree with the GURRS AND PURRS, Terms of Adoption (attached). By signing below, I am attesting to the truthfulness of my answers. I understand that falsification of any of the above information will be grounds to disallow the adoption of a GURRS AND PURRS CAT.

Signature: _____ Date: _____

NOTE: If you are under 18 years of age, a parent or guardian must also sign this application. Thank you for considering a CAT from GURRS AND PURRS. If you have any questions, or if we can be of assistance, please do not hesitate to call.

We reserve the right to refuse any applicant. Approved: _____ Disapproved: _____ Date: _____

Volunteer: _____ Comments: _____