

CAT ADOPTION APPLICATION



Founded in 1869

Women's Humane Society

For The Prevention Of Cruelty To Animals

3839 Richlieu Road • P.O. Box 1470
Bensalem, Pennsylvania 19020-5470
(215) 750-3100

OFFICE USE ONLY

Tag # _____

Adoption Date: _____

Cat's Name: _____

Male Female

Counselor's Initials: _____

PLEASE READ THE FOLLOWING CAREFULLY:

Welcome to the Women's Humane Society.

Please print your name: _____ Date: _____

We hope that we can help you find the right family pet. We ask that you fill out the following application carefully and completely. The application form is designed to help us make the best placement possible; the right home for each cat and the right cat for your home.

There are some days when the adoption process can take 1-2 hours: talking with our adoption counselors, meeting and socializing with the cat that you are interested in, reviewing the follow-up services we provide and the responsibilities that you will assume. Questions and answers about inoculations, training, food, etc., can take time but is time well-invested when you consider that a well-cared for cat may live 10 years. So we ask for your patience and cooperation in the joyful process of bringing people and animals together.

Before going through the cattery, please read the following section carefully. In order to be considered as an adopter today, you must:

- Be 18 years of age or older;
- Have current identification showing your age and present address;
- Be willing and able to provide training, medical care and loving attention for cat;
- Ask our Adoption Counselor about fees.

Understand that the Women's Humane Society reserves the right to deny any adoption application.

Although you are welcome to browse through the cattery with an escort, you must complete the application and speak to a counselor before visiting with any particular cat. There are health and personality profiles along with the background information on almost every animal at the adoption desk. Our Adoption Program Counselors are available to provide additional information and direction in the selection of a shelter cat.

Please turn this page over and fill in the requested information...

CAT SELECTION FORM

What is your main reason for wanting a cat? _____

What else do you want it to be?

- House pet Companion Mouser Breeder Companion for other pet(s) Other

What breed do you desire? _____

What color(s) or marking(s) do you desire? _____

What sex do you prefer? _____ What age range? _____ What coat length? _____

What temperament do you prefer?

- Lap cat Loving Active Independent Playful
 Shy Gentle Other _____

(PLEASE SPECIFY)

Would you like your cat to get along with:

- Other cats Dogs Birds or small caged pets Children Plants Other

Do all family members favor this type of cat? Yes No

CAT CARE

How many hours a day will the cat be left alone? _____

Where will the cat be kept during the day (e.g., in & out, at work, in the yard, patio, etc.)? _____

Where will the cat be kept at night? _____

Do you plan to declaw the cat? _____

How long do you plan to keep the cat? _____

If you must give up the cat, what would you do? _____

Do you object to an inspection of your premises by Women's Humane Society? Yes No

PERSONAL INFORMATION

Name _____

Street Address _____ Home Phone (____) _____

City _____ State _____ Zip _____ Work Phone (____) _____

Name & Phone No. of a friend or relative who does not live with you:

Do you have a Veterinarian? Yes No If yes, name of Veterinarian: _____

Check type of housing:

Own House Own condo Rent a house Rent an apt Military housing Other

Does your landlord allow cats? Yes No

How long have you lived at your present address? _____

Are you planning to move within the next 6 months? Yes No

If you move, what will you do with your cat? _____

How many adults in the household? _____ How many children? _____ Ages _____

Who will be responsible for the cat's care? _____

Does anyone in the household have animal allergies? Yes No

PET HISTORY

Below list pets currently in your home, please include small caged pets and horses:

Types of Animal	Age	Sex	Spayed/Neutered	Kept where?	How long owned?
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		

How did you hear about the Women's Humane Society?

Reputation Newspaper Program Word of mouth Other _____
(PLEASE SPECIFY)

ALL ANIMALS ADOPTED FROM THE WOMEN'S HUMANE SOCIETY MUST BE SPAYED/NEUTERED.
I hereby release to the Women's Humane Society all veterinary records of any and all animals I own and have owned. I certify that all the information in this application is true and I understand that false information may void this application.

Signature _____ Date _____