APPROVED
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## ADOPTION APPLICATION

Cat Matchers P.O. Box 703182 Dallas, TX 75370 972-458-7877

Fax: 877-687-8770 (877-68PURR0)

Catmatchers@yahoo.com

Adoption Location	
Cat's Name	
System number	
Description	

Completion of this form is a requirement for adoption. The information provided helps us assist in finding a good match for both you and the cat. Cat Matchers reserves the right to refuse adoption to anyone. Adoption approval and refusal decisions are made solely at Cat Matchers' discretion. Applicant 1\_\_\_\_\_ Applicant 2 \_\_\_\_\_ Relationship Email Address City/State/Zip \_\_\_\_\_ Phone 2#\_\_\_\_\_Type Place of Employment \_\_\_\_\_ Hours \_\_\_\_ Occupation \_\_\_\_ PLEASE COMPLETE ALL QUESTIONS 1. How did you hear about us? Other: 2. Did you contact anyone from Cat Matchers before coming here? No Who Yes 2. What kind of cat are you looking for: 3. Do you have any preferences as to breed, size, hair length, sex, etc? \_\_\_\_\_\_ 4. Have you ever owned a cat? Yes No 5. Have you ever adopted from Cat Matchers or any other humane society or shelter? Yes No 6. If yes, which one? \_\_\_\_\_\_When? \_\_\_\_\_ 7. Do you still have that pet? Yes/no If not, what happened to it? 8. List pets currently in household: Type Breed Sex Neutered? Age? Kept where? 10. List pets (other than those listed above) owned in past five years: Type Breed Sex Neutered? Age? Kept where? What happened to pet?

11.	. Are all of the pets in your household up-to-date on rabies and vaccinations?	
12.	Who is your Veterinarian?Phone #	
	In your adult life-have you lost pets from: (Check all that apply) old age illness ran away/lost hit by car other injuries more info:	
14.	Do you currently own/rent: house apartment mobile home duplex live with friend or family	
15.	If you rent, does your lease allow pets? Do you have a pet deposit? How much?	
16.	. Is the pet deposit already paid? If not, when will it be?	
17.	. If you rent, please give leasing office/landlord contact # for verification	
18.	8. How long have you lived at your current address?Are you planning to move soon? Yes	
19.	9. If you had to move, what would you do with your pets?	
20.	0. Where would the pet stay if you went out of town?	
21.	1. How many people live in your household? Children's ages?	
22.	2. Do all of the adults in the home know about this adoption? Do they all like pets?	
23.	3. Does anyone in your household have any known allergies to animals?	
24.	4. Who will be responsible for the care of this cat?	
25.	Where will this pet be kept during the day? (Check all that apply) Inside Outside Crated Garage Cat Enclosure Barn Locked in room	
26.	Where will this pet be kept during the Night? (Check all that apply) Inside Outside Crated Garage Cat Enclosure Barn Locked in room	
27.	7. Is anyone home during the day? How many hours at a time will this pet spend alone?	
28.	8. Have you considered the costs involved in adopting a pet (food, vet care, housing, etc.)?	
29.	9. Do you feel you can afford the cost to maintain this cat for its lifetime (12-15 years)?	
30.	). How do you plan to transport this cat?	
31.	Do you plan to declaw this cat? If so, are you familiar with alternatives to declawing?	
32.	2. Have you litterbox-trained cats before? Where will you keep the litterbox?	
33.	If you have dogs, have they been exposed to cats before?	
	4. No cat is perfect! Please tell us what behaviors you are unwilling or unable to work through:  (Please check all that apply)  aeliminating outside the litterbox meowing to go outside  bscratching furniture or carpet rough play	
35.	cbiting/chewing/sucking jumping on counters  How long will you give this cat to adjust to your home?	
	How do you feel about spay/neuter surgery?	
	Have you ever brought an animal to a shelter or animal control?	
	Why?	
	My signature certifies that the above information is true and complete:	
SIGNATURE OF APPLICANTDATE		
	GNATURE OF APPLICANT2 DATE	