



Name of kitten or cat you're interested in _____

Reason for Adopting: _____

Experience w/cats: _____

Do you live rent or own? _____

Name: _____

Name of Spouse/Significant Other: _____

Address: _____

City/State/Zip: _____

Email : _____

Occupation: _____ Employer: _____

Years There _____

Home Phone # _____

Cell Phone # _____

Work Phone # _____

Who will be responsible for the cat's care? (feeding, litterbox, taking to vet)

Age of primary caregiver of cat _____

Do you live rent or own? _____

If you rent, do you have permission from your landlord to have a pet? _____

Landlord Name _____ **Phone #** _____

List all additional people in the household and ages:

Would you allow a home inspection by our personnel? _____

Is anyone in your home allergic to animals? _____

Do or have you owned any cats? _____

Have they been Felv/Fiv tested? _____

Are or were they declawed? _____

Will your new cat be declawed: _____

Does or did your current/previous cat go outside? _____

Will your new cat be allowed on/in: Patio _____ Garage _____ Balcony _____

Do you have a doggy door: Yes _____ No _____

Where will the new cat be kept: Indoor/Outdoor _____ Indoor Only _____ Outdoor Only _____

How much time will the cat spend outside:

Cats and kittens are known to chew/claw furniture, carpets and drapes and dig in potted plants, etc. How will you deal with this problem?

Children may be scratched or bitten by a pet (especially playful kittens). If so, how will you handle it?

On the first night home, where will the kitten stay? _____

How soon after the cat arrives will it be left alone?

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

How often do you travel/vacation?

Who will care for your cat when gone: _____

What would happen to the cat if you were to move:

In what situation would you consider giving up this cat?

Name of current/past Veterinarians used: _____

Phone # _____

Name of Animals treated:

Are you aware that cats need regular vaccinations & require routine veterinary care?

Are you willing and financially able to provide veterinary care if the cat becomes sick or injured? _____

What would you do if your cat required expensive veterinary care?

The life span of a cat may be up to 20 years. Are you prepared to care for this cat for its natural life? _____

Do you have someone who will care for the cat long term if you are no longer able to?

Name: _____

Phone# _____ **Address:** _____

City _____ **State** _____ **Zip** _____

Current Pets –

Name & Type of Pet _____

Age M/F Indoor or Outdoor _____, _____

How Long Owned _____, _____

Past Pets –

Name & Type of Pet *Age M/F *Indoor or Outdoor *How Long Owned Status *If Deceased, Cause & Date

1 _____

2 _____

3 _____

As evidence of my signature below, I attest that the answers that I have given in this document are true and factual to the best of my knowledge and that I have not misrepresented myself in any way.

*** I understand that the completion of this application does not guarantee me the adoption of a Rebel Dogs Rescue cat/kitten and that RDR has the right to decline my application for adoption for any reason.**

Applicant Signature / Date

Co-Applicant Signature / Date

