



PRECIOUS PAWS
FELINE ADOPTION APPLICATION



NAME: _____ **DATE:** _____

ADDRESS: _____ **HOME PHONE:** _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMPLOYED BY: _____ **WORK PHONE:** _____

CELL/ALT. PHONE: _____ **E-MAIL ADDRESS:** _____

- 1.) Have you ever adopted from a shelter before?
- 2.) How did you hear about us?
- 3.) Do you have any pets now?
- 4.) If you have pets now, are they current with vaccinations?
- 5.) Have your cats been tested for feline leukemia/FIV?
- 6.) Are your current pets spayed/neutered?
- 7.) Have you ever brought an animal to a shelter? If so, why?
- 8.) Why do you want to adopt a pet?
- 9.) Is this pet for you or someone else?
- 10.) Describe the perfect cat for you?
- 11.) What type of cat behavior would you find difficult to deal with?
- 12.) Will this cat be indoors only, outdoors, or both?
- 13.) If you had pets before, what happened to them?
- 14.) What would you do if the cat developed some physical disability?
- 15.) Do you consider your pets as part of the family?
- 16.) If you were to move, what would you do with your pets?
- 17.) What if pets were not allowed at your new residence?
- 18.) Who will be responsible for the care of the pet?



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- 19.) Do you have children? If so, what are their ages?
- 20.) Do your children have any known allergies to pets?
- 21.) What would you do if your present pet did not get along with the new cat?
- 22.) How many hours would the cat/kitten be alone during the day?
- 23.) How many years have you lived at your present address? _____
 Rent ___ Own ___ // House ___ Condo ___ Apt. ___ Mobile ___ Other _____
- 24.) Are you aware that annual well-care vet costs can average \$100.00 or more a year? Is this affordable to you?
- 25.) Are you willing to make a lifetime commitment knowing cats live 15-20 years?
- 26.) Vets Name: _____ Vets Phone Number: _____
 Vets Address: _____
- 27.) What is your thought on de-clawing kittens/cats?
- 28.) Do you object to a home visit / phone call from a Precious Paws representative?

Name of a person for reference: _____
 Phone: _____

If you rent, are you permitted to have pets?
 Name of Landlord: _____
 Verifiable Phone: _____

Call Melody at 845-534-9630 with any questions or concerns you may have.

DISCLOSURE TERMS

IF FOR ANY REASON AN ADOPTED PRECIUOS PAWS PET CANNOT LIVE WITH THE ADOPTER, YOU ARE REQUIRED TO NOTIFY PRECIOUS PAWS OR ONE OF ITS REPRESENTATIVES AND RETURN THE PET TO US IMMEDIATELY. ADDITIONALLY, IF PRECIOUS PAWS SUSPECTS THE ANIMAL IS BEING NEGLECTED OR ABUSED IN ANY MANNER; WE RESERVE THE RIGHT TO RECLAIM THAT ANIMAL BY ANY NECESSARY MEANS AND AT ANY TIME. FURTHER, IT IS THE SOLE RESPONSIBILITY OF THE ADOPTER TO SECURE A VET (S) FOR THE PURPOSE OF MAINTAINING THE HEALTH OF THE ANIMAL THROUGHOUT THE CATS LIFE. PRECIOUS PAWS MAKES EVERY AVAILABLE EFFORT TO ENSURE ITS CATS/KITTENS ARE IN 100 PERCENT-SUPREME HEALTH FOR ADOPTION INCLUDING THE TESTING OF KNOWN PARENTS AND/OR THE ADOPTED CAT/KITTEN, HOWEVER; WE CAN NOT BE HELD LIABLE FOR UNFORSEEN COMMUNICABLE DISEASE, THE PRESENCE OF FLEAS OR FLEA EGGS, PARASITES, OR OTHER FELINE HEALTH-RELATED ISSUES (WE TRY AS HARD AS WE CAN TO ELIMINATE AND/OR PREVENT FLEAS, AND PARASITES USING VET PRESCRIBED METHODS PRIOR TO ADOPTION). YOU MUST CONSULT YOUR VET FOR ANY TREATMENT OPTIONS AVAILABLE. BY SIGNING BELOW, YOU ACKNOWLEDGE THAT YOU HAVE READ, UNDERSTAND, AND AGREE TO BE BOUND BY THE TERMS ABOVE.

Sign Here: _____

FOR OFFICE USE ONLY: _____
Cat/Kitten of Interest: _____