

Name \_\_\_\_\_ Date \_\_\_\_\_

## Cat Adoption Application

Blackford County Animal Shelter PO Box 70, 2520 N- 200 E, Hartford City, IN 47348

Phone 765-348-5284 Fax 765-348-1002

[www.blackfordcountyanimalshelter.com](http://www.blackfordcountyanimalshelter.com)  
[blackfordcountyanimalshelter@yahoo.com](mailto:blackfordcountyanimalshelter@yahoo.com)

Thank you for choosing to adopt a shelter pet.

Our staff and volunteers have an obligation to ensure that the animals left in our care are placed into responsible, loving forever homes. Our adoption process may take 2-5 days and this application must be filled out completely.

Name of cat(s) you are interested in: \_\_\_\_\_

Your name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Alt Phone: \_\_\_\_\_

email \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ DL#: \_\_\_\_\_

How did you hear about our shelter? \_\_\_\_\_ Newsletter \_\_\_\_\_ Website \_\_\_\_\_ Reference \_\_\_\_\_

### YOUR PERSONAL INFORMATION

Are you 20 years or older? \_\_\_\_\_yes \_\_\_\_\_no Are you a student? \_\_\_\_\_yes \_\_\_\_\_no

Do you live in a \_\_\_\_\_house I own \_\_\_\_\_house I rent \_\_\_\_\_apartment \_\_\_\_\_condo \_\_\_\_\_mobile home

Does your landlord allow pets? \_\_\_\_\_yes \_\_\_\_\_no Is there a weight limit or deposit? \_\_\_\_\_yes \_\_\_\_\_no

Landlords name \_\_\_\_\_ Phone \_\_\_\_\_

Does everyone in your household know that your are planning to adopt a pet? \_\_\_\_\_yes \_\_\_\_\_no

Number of children in your household: \_\_\_\_\_ Ages: \_\_\_\_\_

Is anyone in your household allergic to animals? \_\_\_\_\_yes \_\_\_\_\_no

If yes please explain: \_\_\_\_\_

Have you ever surrendered an animal to a shelter? \_\_\_\_\_yes \_\_\_\_\_no

If yes, when and why: \_\_\_\_\_

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Please list 3 references including 2 non-family members:

1. Personal reference \_\_\_\_\_ Phone# \_\_\_\_\_

2. Personal reference \_\_\_\_\_ Phone# \_\_\_\_\_

3. Personal reference \_\_\_\_\_ Phone# \_\_\_\_\_

Is this your first time owning a pet? \_\_\_\_ yes \_\_\_\_ no

## CURRENT AND PREVIOUS PET INFORMATION

Species/animals name:      Age              spayed/neutered      current/previous      amount of time owned

\_\_\_\_\_  
\_\_\_\_\_

If any of the pets are no longer with you what happened to them...deceased, gave away, surrendered,etc

If more than 3 please add on back of application.

Are all current pets up to date on vaccines? If not why \_\_\_\_\_

Please provide name and phone number of veterinarian(s) that provided care for your current and previous pets:

\_\_\_\_\_  
\_\_\_\_\_

Have your current pets been around other cats? \_\_\_\_\_ dogs? \_\_\_\_\_ other? \_\_\_\_\_

## ADOPTING CAT INFORMATION

My reasons for wanting a cat (*check all that apply*): \_\_\_\_companion \_\_\_\_playmate for kids

\_\_\_\_companion for pet      other \_\_\_\_\_

I would like my cat to have \_\_\_\_short hair      \_\_\_\_long hair      \_\_\_\_no preference

Age range:      \_\_\_\_kitten      \_\_\_\_6 mos-12 mos      \_\_\_\_1-2 years      \_\_\_\_over 2 years      \_\_\_\_senior

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- \* Will the cat/kitten be kept: \_\_\_\_\_indoors \_\_\_\_\_outdoors
- \* Are you planning on declawing your cat? \_\_\_\_\_yes \_\_\_\_\_no
- \* How many litter boxes will you provide? \_\_\_\_\_
- \* Do you understand that this kitten/cat is not guaranteed to be litter box trained? \_\_\_\_\_yes \_\_\_\_\_no
- \* Are you willing to work with behavior or litter box issues? \_\_\_\_\_yes \_\_\_\_\_no
- \* Do you have the means/funds to provide vet care for your pet? \_\_\_\_\_yes \_\_\_\_\_no
- \* Are you committed to providing annual vet care for your pet? \_\_\_\_\_yes \_\_\_\_\_no
- \* What would you do if your pet were diagnosed with an unexpected illness?

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\* I would return this animal for: (check all that apply) \_\_\_\_\_biting/nipping \_\_\_\_\_moving \_\_\_\_\_allergies  
\_\_\_\_\_improper elimination \_\_\_\_\_don't have time for \_\_\_\_\_escape risk other \_\_\_\_\_

***I certify that all information I have given in this application for a companion dog is true and correct to the best of my knowledge and belief. I give Blackford County Animal Shelter permission to contact the veterinarian(s) and landlord I have listed for the purpose of verifying information.***

***I also understand that Blackford County Animal Shelter has the right to APPROVE or DENY any applicant based on the suitability and verification of the information included in this application and in accordance with policies established by the Board of Directors.***

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Our goal is to assist you in selecting a pet appropriate for your family and lifestyle and to ensure "a good quality of life" for each pet adopted.***

***Dedicated to the welfare of companion animals....."until they all have homes"***