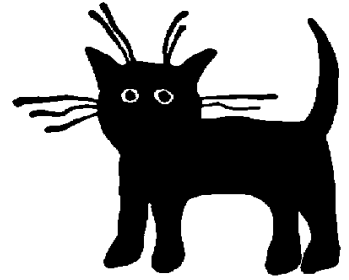


ASAP ADOPTION APPLICATION AND CONTRACT



Today's Date: _____ Intake Date: _____ Intake Date(2nd cat): _____

Cat's Name: _____ KC# _____

Cat's Name: _____ KC# _____

Where did you hear about ASAP? _____

Thank you for completing this profile. The information you provide will help insure a successful adoption.

Name: _____ Spouse or partner's name: _____

Home address: _____ City: _____ Zip: _____

Students, please provide local address: _____

Phone: _____ Other phone: _____ email address: _____

Driver's License Number: _____ State: _____ Expiration date: _____

(Please present license to ASAP volunteer for verification). **Volunteer initial here upon verification:** _____

Are you: working retired attending school homemaker other: _____

Do you own your residence? Yes No If you do not own your residence, please provide the name and contact information for owner/landlord: _____

How long at current residence? _____ Do you plan to move in the coming year? Yes No

Number of adults in household: _____ Ages of any children in household: _____

List all unrelated adult co-tenants/roommates: _____

Do you have consent from all adult household members to adopt a cat/kitten? Yes No

Household activity level is usually: low medium high

Have you had a cat(s) in the past 5 years: Yes No Do you still have the cat(s)? Yes No

If "no", what happened to the cat(s)? _____

List cats currently in household, including age, gender, and if neutered: _____

Please list any dogs in household (include breed, gender, age, and if neutered): _____

List any other pets: _____

Name of Veterinarian: _____ Can ASAP call for reference? Yes No

The average lifespan of a cat is about 15 years. Are you prepared to make a long-term commitment to owning a cat? Yes No

Are you prepared to assume financial responsibility for your new cat or kitten? Have you considered the cost of food and litter, and regular or extraordinary veterinary care if your cat becomes ill? Yes No

Within two weeks of adoption, in the event that the cat/kitten becomes ill, you may call ASAP and request assessment. Please refer to the back of your cat's vet record for instructions. **If the cat/kitten receives any treatment at any veterinary facility without ASAP Board approval, treatment and/or veterinary costs will not be reimbursed.**

Adopter, do you understand the two-week grace period and procedures for veterinary treatment and reimbursement following adoption? Yes No **Adopter, please initial here:** _____

Will your new family member be an indoor only cat? Yes No

All cats benefit from being indoor animals but some cats must be kept indoors. **Certain physical features such as white ears and/or noses require remaining out of the sun because of the danger of cancer. A declawed cat must be indoor only.** Volunteer, initial here if this cat must be indoor only: _____

Kittens must be kept strictly indoors until they are a minimum of six months old. If you have chosen a kitten, do you agree to keep it indoors until it is at least six months of age? Yes No N/A-Adult

Cats require time to become familiar with new surroundings and realize they live with you. If your cat will be indoor-outdoor, **do you agree to keep it confined indoors for a minimum of two weeks following adoption,** allowing time for the cat to acclimate to the new environment? Yes No N/A-Indoor Only

Coyotes pose a danger throughout our community. The danger is especially high at night and near sundown and sunrise. If your cat is to be an indoor-outdoor cat, **do you agree to bring it indoors each night before sundown and confine it until after sunrise?** Yes No N/A-Indoor Only

To ensure the safety of the cat/kitten, ASAP reserves the right to a property inspection when applicable.

A cat or kitten is not to be given as a gift. The person completing this adoption contract is to be the caregiver of the adopted cat/kitten at the address stated on the contract.

I certify that the preceding information is true and accurate.

Signature: _____ Date: _____

For ASAP Lead Volunteer Use:

Property/Homeownership verified: Yes No Landlord Approval (if renting): Yes No

Method of verification: _____

Have all adult family members/housemates agreed to this adoption? Yes No

Adoption approved: Adoption denied: Reason: _____

Other Comments: _____

Lead Volunteer Initials: _____