



## Adoption Application

The focus of New Beginnings Cat Rescue (NBCR) is to place animals in loving, permanent homes where they will be cared for responsibly. Potential adopters or fosters are screened, up to and including home visits. We reserve the right to refuse placement of an animal for any reason. This application is part of the screening process and we ask that you complete it as fully and accurately as possible. Thank you for your understanding.

### PROSPECTIVE PET ADOPTER INFORMATION

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

Home Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Personal E-mail: \_\_\_\_\_ Birth Date/Age: \_\_\_\_\_

How did you hear about NBCR? \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Work E-mail: \_\_\_\_\_ Work Phone: \_\_\_\_\_

May we phone you at work? Yes \_\_\_ No \_\_\_ Hours: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Contact Phone: (list all) \_\_\_\_\_

Have you spoken/corresponded with anyone with NBCR? Yes  No  If yes, who? \_\_\_\_\_

Have you ever applied or adopted a pet from NBCR? Yes  No  If yes, when? \_\_\_\_\_ Which pet? \_\_\_\_\_

Have you ever adopted from any other rescue? Yes  No  If yes, which one? \_\_\_\_\_

Why you would like to adopt a cat? \_\_\_\_\_

Is there one pet(s) in particular you are interested in? Yes  No  If yes, list name(s) \_\_\_\_\_

If not, do you have any preferences on age, hair length, color, gender, personality, etc.? \_\_\_\_\_

What type of cat are you looking for? House Cat  Mouser  Barn Cat  Gift  Companion for Pet

Who is the cat for? \_\_\_\_\_ Who will be the primary caregiver? \_\_\_\_\_

Where do you plan to keep the litter box? \_\_\_\_\_

What kind & brand of food do you plan to feed this cat? \_\_\_\_\_

Where will the pet stay during the day? \_\_\_\_\_ During the night? \_\_\_\_\_

Would you consider declawing this cat? Yes  No  Will this cat be an indoor , outdoor , or indoor/outdoor cat ?

Would you be willing to allow a NBCR Representative to visit your home? Yes  No  If no, why? \_\_\_\_\_

**HOUSEHOLD INFORMATION**

How many individuals are in the household? \_\_\_\_\_ How many are children? \_\_\_\_\_ Ages? \_\_\_\_\_

Have you or they been around cats before? Yes  No  If yes, when? \_\_\_\_\_

Are there any children who visit your household frequently? Yes  No  If yes, what are the ages? \_\_\_\_\_

Does anyone in the household have allergies to: Cats — Yes  No  and/or Dogs — Yes  No

Is your home a house , apartment , or mobile home ? How long have you lived there? \_\_\_\_\_

Do you own  your home or are you renting ? If renting, does your lease allow pets? Yes  No

If renting, have you paid your pet deposit? Yes  No  How much? \_\_\_\_\_ Can you provide proof? Yes  No

If renting, are there limits on the # of pets? Yes  No  How many? \_\_\_\_\_

May I call your landlord / apartment complex? Yes  No  Name & number, if applicable: \_\_\_\_\_

Do you plan to move in the near future? Yes  No  If yes, what will you do with your pets? \_\_\_\_\_

Do you plan on becoming pregnant? Yes  No  If yes, what will you do with your pets? \_\_\_\_\_

Do you plan on getting married? Yes  No  If yes, what will you do with your pets? \_\_\_\_\_

Do you plan on getting divorced? Yes  No  If yes, what will you do with your pets? \_\_\_\_\_

**APPLICANT'S PETS**

Do you currently own a cat(s) now? Yes  No  How many? \_\_\_\_\_ Breed? \_\_\_\_\_ Age? \_\_\_\_\_

If yes, have they been tested for FIV/FelV? Yes  No  If yes, what were the results?  
\_\_\_\_\_

If you currently have cats, are they declawed? Yes  No  If yes, why did you choose to declaw? \_\_\_\_\_

Do you currently have any other pets? Yes  No  If yes, please list species & age. \_\_\_\_\_

If you have pets, are they spay/neutered? Yes  No  Up to date with vaccinations? Yes  No

On monthly heartworm & flea prevention? Yes  No  If yes, what kind? \_\_\_\_\_

Do you travel frequently? Yes  No  Who cares for your pet(s) while you travel? \_\_\_\_\_

Have you had any other pets in the last five years that you do not currently have? Yes  No

If yes, why are they no longer with you? \_\_\_\_\_

Have you ever brought an animal to a shelter or animal control? Yes  No  If yes, why? \_\_\_\_\_

Have you ever given an animal up for adoption or had to re-home a pet? Yes  No

If yes, why? \_\_\_\_\_

What is the name, address & number of your current or last vet? \_\_\_\_\_

Do you give us permission to contact your vet listed above? Yes  No

Please list the name, address and number of the person(s) who will care for your pets if you should become ill, disabled or deceased. \_\_\_\_\_

**ADOPTER AGREEMENT**

Do you understand that the animal you are adopting could live as long as 25 years; that pet ownership involves yearly medical costs, food costs, wear and tear on furniture; that animals do not come with a guarantee, and as the adopter you are accepting responsibility for the animal's quality of life? Yes  No

Do you agree that if for any reason you can no longer keep this animal, you will contact your adoption counselor to make arrangements to return the animal to New Beginnings Cat Rescue? Yes  No

Do ALL of the individuals at your home consent to the adoption of this pet? Yes  No

I am in agreement that unannounced follow-up visit(s) may be made to my home by NBCR and that any violation of this contract is good and sufficient reason for reclaiming of said pet by NBCR.

My signature indicates I have answered all of the above questions honestly and to the best of my ability. If at any point during the adoption process, I choose not to proceed, I agree to let NBCR know immediately of the new situation.

I agree to hold New Beginnings Cat Rescue, the adoption venue, and all volunteers blameless and not liable for any injury, illness, or behavioral problems that should be discovered now or in the future. However, we will always attempt to work with you regarding any problems and we will always take the animal back if your situation changes.

I agree to the above statements and have accurately and truthfully completed this adoption application.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**DISCLAIMER**

Adopters must be 21 or older and willing to invest the time and money required to care for a pet. In addition to providing love and attention, regular medical care is required. Please ask if you would like more information about veterinary fees and costs.

Our animals come from a variety of situations. Some have been dumped at shelters or vets, and many are ill or malnourished when rescued. Although the animal has been in a protected environment, there is the possibility of unrecognized illness appearing after an adoption is finalized, especially because of the stress the animal may experience during the first few days at its new home. We advise adopters of the animal's known history and provide its veterinary records, but frequently we know only what the animal chooses to tell us. **We cannot make any guarantee regarding the long-term health of any animal.**