Adoption Application

Connecticut Cat Connection and its affiliates is a small group of volunteers helping cats in need of finding new homes. We want every applicant to understand that our mission is to place the right cat into the right home to assure a long, lasting relationship. We also want every applicant to understand the responsibilities involved in caring for a pet and that since cats can live 20+ years, it is a life time commitment. Cats bond with their human family and need to be treated as part of the family. Please proceed with this application if you are in agreement with this statement and are committed to giving a cat a life-time home. Also allow time for us to process your application

1. Name:	Date:		
2. Address –complete: (stree	t, city, state):		
3. Phone # (work)	(home) Best time/way to con	staat you?	
	Dest time/ way to con		
5a. Employer:			
6a. Have you ever had a cat/	kitten before?		
6b. Why do you want to adop	pt a cat/kitten?		
7. What cat (name) or type are you looking for and how	of cat / kittens (age, sex, colo v many?	or, type, if any preference)	
medical care, the cost for a si	ck cat can cost \$500 for one v	it \$500 a year. If the cat needs isit. Are you prepared to take nsurance?	
9. Do you rent or own?	How long have you li	ved at this location?	
If renting, please give landlor	rd name and phone #:		

10. Address of prior address / dates if less than one year:

11. For what reas	ons would you surrender or return the	e cat?					
12. How many ho	ours will the cat be alone?						
13. Are you looking for a cat for indoor only, outdoor only or both							
14. Do you plan of Why or why not?_	on declawing?						
15. Is anyone in the	he household allergic to cats?						
16a. Please provid	ults in household? e full names of each adult 18 years an						
	ildren live in the household? A	Ages?					
If yes, please spec	current pets that you have: cify: (list all pets – use back of page if Cat? M/F? Altered? Age? Indoor/ou						
	e: arian <u>whom you used in the past</u> for t ne office, address and phone number.	he care of your pets? Please					
Vet: Name records are	Address: under?	Phone:					
	equire your permission before releasing a your application, please contact your ve ed in adopting from.						
When was your pe	et last seen by a vet?						
20. Please provide	e a personal reference not living with	you:					
Name:	Relation	ship?					
Phone number:							

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21. General information:

- You must be 21 years or older to adopt.
- A Driver's License and proof of age and address is required.

22. Statement of Understanding

By signing below, I acknowledge that I understand everything that I have read in this application and answered all of the questions truthfully. I also understand that any knowingly false or incomplete answers may cause my application to be denied.

I hereby give a representative from Connecticut Cat Connection permission to contact (as applicable) my landlord, veterinarian, and personal reference to verify any of the information supplied in this application.

I further understand that Connecticut Cat Connection is considered the guardian of the animal in question and has the right, in its sole discretion, not to approve this application.

Signature of applicant:	 Date:
Signature of co-applicant:	Date:

How did you hear	about us?	: Drove-by?Newspap	per Ad?
Petfinder.com?	Flier?	Word of mouth?	Petco customer?
Other?(expla	ain)		