

# Pallet Cat Foundation

## Adoption Application

Applicant Name \_\_\_\_\_ Address \_\_\_\_\_  
City, State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_ Email \_\_\_\_\_

1. What type of cat are you interested in? Male \_\_\_ Female \_\_\_ Kitten \_\_\_ Adult \_\_\_  
Name of cat you are interested in \_\_\_\_\_  
Any particular characteristics \_\_\_\_\_ Personality type \_\_\_\_\_
2. How many people currently reside in your household? \_\_\_ Adults \_\_\_ Children \_\_\_  
Do all adults in the household approve of getting a cat \_\_\_\_\_
3. Are there children who live with you or visit frequently? Y \_\_\_ N \_\_\_ List ages:  
\_\_\_\_\_
4. For whom are you adopting the cat? Self \_\_\_ Gift \_\_\_ If Gift, Name of person:  
\_\_\_\_\_ Relationship: \_\_\_\_\_ Age: \_\_\_\_\_
5. Does any member of household have any allergies to animals? Y \_\_\_ N \_\_\_ If yes,  
explain \_\_\_\_\_
6. Who will be responsible for the cat's care?  
\_\_\_\_\_
7. Where do you live? House \_\_\_ Apt \_\_\_ Condo \_\_\_ Farm \_\_\_ Mobile home \_\_\_  
Townhouse \_\_\_\_\_
8. Do you own or rent residence? Own \_\_\_ how long? \_\_\_ Rent \_\_\_ If you rent, are  
pets allowed? \_\_\_\_\_  
Name and phone number of landlord : This will be  
verified \_\_\_\_\_
9. Where will the cat be kept? Indoor only \_\_\_ Outdoor only \_\_\_ Both indoor and  
outdoor \_\_\_\_\_
10. Hours the cat will be left unattended during the day \_\_\_ If unattended where will  
cat be kept? \_\_\_\_\_
11. If you move, what will you do with the cat?  
\_\_\_\_\_
12. How far from the road/traffic is your home/farm located?  
\_\_\_\_\_
13. Would this be your first experience owning a pet. Y \_\_\_ N \_\_\_ Are other pets in the  
home Y \_\_\_ N \_\_\_

What pets are currently in the household?

Name \_\_\_\_\_ Dog/cat \_\_\_\_ age \_\_\_\_ spayed/neut Y \_\_\_\_ N \_\_\_\_ Kept Inside/Outside

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Other species living in the household: \_\_\_\_\_

14. How many other pets have you owned in the last 5 years \_\_\_\_\_

What became of them \_\_\_\_\_

15. Who is your veterinarian \_\_\_\_\_ Phone number \_\_\_\_\_

Do we have your permission to contact your vet ? Y \_\_\_\_\_ N \_\_\_\_\_

16. Do you plan to declaw the cat Y \_\_\_\_ N \_\_\_\_ If yes, why

\_\_\_\_\_

If the cat became destructive would you declaw? \_\_\_\_\_

17. What problems would constitute a reason for giving up your cat?

\_\_\_\_\_

18. For what reason do you want to adopt a cat ? Circle all that apply: family pet/adult companion/child's pet/companion for another pet/mouser/ barn cat/ gift

\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Reviewed by

\_\_\_\_\_  
Date