



12 Germay Drive
Wilmington, DE 19804
www.faithfulfriends.us

APPLICATION TO ADOPT A CAT

Thank you for considering the adoption of a homeless pet through Faithful Friends. Please print and fill out the application and mail it our Foster Care/Adoption Coordinators, at the above address or fax it to (302) 427-2855. ***This information is important in matching you and a pet.*** Incomplete applications will not be considered.

APPLICANT'S INFORMATION:

Name _____ Spouse/Partner/Roommate _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell phone _____

Email Address: _____ Age: Over 21? Yes No

Employer _____ Occupation _____ Hours _____

*May we contact your employer to verify employment? If so, please provide the contact name and telephone number:

Contact: _____ Telephone: _____

Please describe the kind of cat you are interested in adopting:

*****If you know which cat you want to adopt enter the Name here: _____*****

Age: _____ Sex: _____ Reason for sex preference? _____

Breed/mix: _____ Coloring: _____ Temperament _____

Why do you want a cat? _____

PERSONAL INFORMATION:

What is your living arrangement? Home Owner House Rental Live with parents Aparment/
Condo/Townhome Rental

If rental, Landlord's Name and Phone Number _____

Number of Adults in Household: _____ Number of Children: _____ Ages of Children: _____

Are the adults in your household aware that you plan to adopt? Yes No

Do you or anyone in your household have any known allergies to animals? Yes No

Are you a student? Yes No Are you active in the Military? Yes No

ANIMAL CARE HISTORY:

Is this your first experience with a cat? Yes No

Are you prepared to make a commitment to your cat for the rest of its natural life (perhaps as long as 15-20 years)?
 Yes No

Have you previously adopted from us or any other agency/shelter? Yes No

Have you ever given away or returned a pet/animal for any reason? Yes No

If yes, why? _____

Why do you want a pet? House Pet Gift Mouser For other pet Companion for child

Other _____

Will the cat be Indoor Only Outside Combination

Do you plan to have the cat declawed? Yes No

If you own a dog, describe his/her temperament _____

Please list your current pets:

Name	Breed	Years Owned	Spayed/Neutered?	Where is the pet kept?

VETERINARY INFORMATION:

Do you understand that there is a continuing cost of proper veterinary care for your pet and are you prepared to incur that cost? Yes No

Name of Current or last Veterinarian/Animal Hospital : _____

Phone number _____ Name records are under _____

When was your last visit to the vet? _____ Reason for visit? _____

To your knowledge, are your animals current on their vaccinations? Yes No

Please list the pets you have owned in the past 10 years not listed above? (use separate sheet, if needed)

Name	Breed	Years Owned	Spayed/Neutered?	What happened to the pet?

**Please list two personal references and his/her relationship to you (one must be a non family member):
(If you have a vet reference we do not need two personal referances, but it would be good to have in case)**

Name _____ Relationship _____ Phone _____

Best time to call? _____

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Best time to call? _____

STATEMENT OF UNDERSTANDING:

All of the information I/We provided in this application is true and correct. If any of the information changes, I/We will advise you promptly.

I understand the responsibilities that I am assuming by adopting this animal. I know that there may be unforeseen circumstances and expenses with the introduction of a new pet in my household.

I hereby give a representative of Faithful Friends, Inc., No Kill Animal Shelter who is the guardian of this animal permission to contact my landlord, if applicable, my veterinarian to verify the health and care of my current animals, and or my references to inquire about the type of cat owner I would be and confirm the information you supplied on this application. I also agree to a "progress check" in the future, where a representative of the animal rescue organization may either call to inquire about the new pet or visit my home to verify my new pets living conditions.

By signing below, I acknowledge that I understand everything I have read in this application and I have considered all of the questions truthfully. I further understand that Faithful Friends, Inc. No Kill Animal Shelter 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

HOW DID YOU HEAR ABOUT US? _____

For RESCUE Use Only	
Application accepted by the following representative: _____ Comments:	
Faxed on _____	Faxed By: _____
Application Processed By: _____	Date Processed: _____
Adoption Counselor handling appointment: _____	
Date/Time of Appointment: _____	