

San Antonio
Feral Cat Coalition



Caring for Community Cats

facebook.com/safccc.org
www.sanantonioferalcats.org

Vendor _____

Foster _____

CAT ADOPTION APPLICATION

All of our adoptable cats and kittens are spayed/neutered, combo tested, received a rabies shot/vaccinations/dewormer/flea treatment and are micro-chipped (24PetWatch). All of these rescued animals are in foster homes and every attempt is made to ensure happy, healthy cats and kittens for your adoption. Our foster homes strive to give the very best indication of their temperaments to include whether they get along well with children, other cats, dogs, etc. Our aim is to match the right temperament of animal with the family environment for successful adoptions. Please listen carefully to instructions on how to introduce a new animal into a household, especially if there are other pets sharing the environment. Following simple advice can mean the difference between a successful adoption and a failure. However, if an adoption does not work out well, and we cannot solve the problem, you can return your adopted pet to us. If your circumstances change at any time and you are unable to care for your adopted pet, you can return him/her to us and we will find another suitable home.

Pet ownership is a serious responsibility and a lifetime commitment. We require this application be completed by the adopter. This application is designed to help us determine if the adoption is in the animals' best interest and assist potential adopters in finding an animal most compatible with their lifestyle. **SAN ANTONIO FERAL CAT COALITION RESERVES THE RIGHT TO VERIFY ANY INFORMATION PROVIDED AND DECLINE ANY APPLICATION.**

In order to adopt an animal you will need: a current ID with home address, to be at least 21 years of age and have the permission of your landlord or own your residence.

I AM ADOPTING THIS CAT FOR:

What type of cat/kitten are you interested in?

- Male Female Kitten (under 5 months) Adult Long Hair Short Hair Any

Personality type: _____ Color preference: _____

Why do you want to adopt a cat? Myself My children My current pet Gift/Surprise Mouser

Other, please explain: _____

PERSONAL INFORMATION

Date: _____ Adopted Animal Name: _____

Applicant name: _____ Applicant Age: _____

Address: _____ Apt. # : _____

City: _____ State: _____ Zip: _____

Driver's License # _____ State: _____ Date of Birth: _____

Cell phone: _(_____) _____ Secondary Cell: :_(_____) _____

Home phone: :_(_____) _____ Home e-mail: _____

Work phone: :_(_____) _____ Work or alternate e-mail: _____

Employer: _____ Occupation: _____

Emergency Contact: _____ Phone: _(_____) _____

(Someone outside your personal household) Relation: _____

Where do you live? House Apartment Condo Farm Mobile home Military Housing With Parents

Do you own your own home? Yes No How long have you lived there? _____

Are you: Active Military Retired Military Working Civilian (non-Military) Retired Civilian

If you rent your residence, please provide the name of your Apartment Complex / Landlord:

Name: _____ Phone: (____) _____

If you live or rent your residence from your parents/relative please provide their name and relation.

Name: _____ Phone: (____) _____ Relation: _____

Are pets allowed? Yes No Not sure Have you researched the required pet deposit? Yes No

Where will the cat be kept? Indoors only Outdoors only Both in/out

How many people currently reside in your household? _____

Do any children under 18 live in your home or visit frequently? Yes No # _____ **List ages:** _____

Is everyone in the home agreeable and aware of your interest in adopting? Yes No

Does any member of the family have any allergies to animals? Yes No

If yes, are they taking medication? Yes No

If other explains: _____

Who will be responsible for the daily care of the cat? _____

Will anyone be home during the day? Yes No

How many hours will the cat be left unattended? Almost never 1-6 hrs 6-10 hours 10+ hours

When no one is home, where will the cat be kept? Loose in house Confined to a room (s) Kennel/Crate

How far from the road/traffic is your home/farm located? _____

Is the volume of traffic light moderate heavy

PET HISTORY (PAST 5 YEARS)

Have you ever had a pet animal before? Yes No

Describe those animals you still care for or that are living at your household:

Name	Breed (Dog/Cat/ Other)	Age	Sterilized? Yes or No	Current on Vaccs? Y/N	Declawed? (Cats) Y/N	Kept where? Inside/Outside	Length of time owned

Describe those animals you no longer care for:

Name	Breed (Dog/Cat/Other)	Age	Sterilized? Y/N	Current of Vaccs? Y/N	Declawed? (cats) Y/N	Reason no longer in your care? (Cause of death, move, etc...)

Who is your regular veterinarian? (Or place pet was last vaccinated)

Please provide name: _____ telephone number: _____

I agree that a representative of San Antonio Feral Cat Coalition may contact my veterinarian to confirm the information provided herein regarding my pets, and I consent to the release of such veterinary information by my veterinarian to San Antonio Feral Cat Coalition. Yes No Initial: _____

Are you financially able and willing to provide annual checkups, vaccinations, and ANY medical care? Yes No

Your view on limits for medical care for your pet: _____

If you have a dog, is he/she permitted to run loose? Yes No **Location?** In the house An enclosed yard

What precautions would you take to properly introduce a new cat into your home if you have other animals

(a dog, bird, rabbit, another cat, etc.)? _____

What will you do if you can no longer keep this cat? _____

What will you do with this cat if you must move? _____

If you go on vacation, what will you do with the cat? _____

Are you planning to de-claw your adopted cat? Yes No Not sure

Are there any circumstances that would make you decide to de-claw your adopted cat? Yes No Not sure

Have you ever adopted an animal from a rescue/animal control agency? Yes No

Have you ever had an application rejected for adoption of an animal from a rescue/animal control facility? Yes No

If yes, explain: _____

What would be considered unacceptable behavior (by a cat) in your home? _____

How would you handle it? What steps will you take to resolve? _____

For what reason would you give up this animal? e.g. moving, destructive, aggressive? _____

Have you ever had to re-home a pet you owned? Yes No Circumstance: _____

Where did you place it? _____

What are plans for the cat's care in case of a life event: death in the family (even your own), Military deployment, etc.?

Anything else you would like to tell us? _____