

Purrs And Whiskers Shelter, INC.



**P.O. Box 411363
Melbourne, FL 32941-1363
321.752.5120**

The following information is requested so we can assist you in the selection of a new cat. The cat's welfare is our foremost consideration. The application is designed to help us determine if the adoption is in the cat's best interest, and to assist you in finding a cat most compatible with your lifestyle.

Adoption application for (name or description of cats) _____

Name _____ Spouse's Name _____

Address _____ City/State/Zip _____

Driver's License # _____ State _____ DOB _____ exp _____

Phone _____ Pager/Cell _____ Email _____

Place of employment _____ How long? _____ Phone _____

Spouse employed by _____ How Long? _____ Phone _____

Do you rent or own? _____ If you own, is it a home, townhouse, or condo? _____

If you rent, name of Community and Contact Info to verify pet security/deposit has been paid and number of pets allowed. _____

Are you anticipating a move, pregnancy, marriage, new home, or any other major change anytime in the next few months? Explain _____

Ages of children living in the household _____ Permanently or occasionally? _____

Does anyone living in your household have any kind of medical condition...allergies, suppressed immune system, diabetes, or taking blood thinners? No _____ Yes _____ If so, what is the condition? _____

Where will the litter box be kept? _____

Where will the pet be kept during the day? _____

How many hours will it spend alone without human companionship? _____

Do you plan to keep your pet (circle one) inside outside other (explain) _____

When do you plan to declaw (circle one) never immediately 4-6 months 1 year

What pets do you currently have in your household?

Name	Age	Species	Declawed?		Spayed/Neutered?		Shots up-to-date?	
			Yes	No	Yes	No	Yes	No
		Cat Dog other _____						
		Cat Dog other _____						
		Cat Dog other _____						
		Cat Dog other _____						
		Cat Dog other _____						

If more space is needed please use the same format as this, on the back of the application.

If any cats are listed above, are any of them overweight or on a special weight diet (if yes, please explain):

If any dogs are listed above, what breed or breed mixes is/are they:

List pets owned in the past 5 years, other than those listed above.

Species	Name / Age	What happened to this pet?
Cat Dog other _____		
Cat Dog other _____		
Cat Dog other _____		
Cat Dog other _____		
Cat Dog other _____		

Who is your veterinarian? _____

I attest that the information provided above is correct. I understand that this is only an application for adoption and does not constitute a contract or guarantee me to receive the pet applied for. PAWS has the right to refuse an adoption to any individual on any grounds. I give PAWS permission to verify the information provided on this sheet.

Signature _____ Date _____