



ADOPTION QUESTIONNAIRE FORM

Please fill-out this form in its entirety.

Name of cat(s) you wish to adopt: _____ Date: _____

HOUSEHOLD INFORMATION

Name: _____ Are you over 21yrs of age? Yes No

Address: _____ Apt#: _____

City/State: _____ Zip: _____

Primary Phone: _____

Email: _____

Do you: Own
 Rent Landlord/Association Contact Info: _____
 Live with parents

Who else lives in your household (include ages of all children)? _____

Is anyone in the household allergic to animals? _____

Who will be primarily responsible for this animal? _____

In your absence, who will care for this animal? _____

CURRENT PETS/MOST RECENT PETS

Animal Type	Age	Sex	Spay/ Neuter	For cats, is it declawed?	Lives: inside, outside, or both?	How long have you had this animal?	Is this animal still with you?	Vet name/phone number

Your experience in owning a pet:

- First-time
- Some knowledge
- Very experienced

The animal will live:

- Indoors only
- Indoors/Outdoors
- Outdoors only

Your time away from home:

- Home all day
- Out part-time
- Away 7-10hrs

Cats like and need to scratch, how will you handle this behavior? (Check all the apply)

- Nail Trimming
- Scratching Post
- Declaw
- Unsure
- Other: _____

Please check any of the following reasons for adopting a pet.

- Companion for another pet
- Gift
- Child's Pet
- Family Pet
- Other: _____

HOPES & EXPECTATIONS

Briefly explain what you're hoping to get out of adopting this pet.

PLEASE READ AND SIGN

I hereby release to New Beginnings Animal Rescue all veterinary records of all the animals I have had past and present. I certify that all the information in this application is true and I understand that false and/or inconsistent information may void the application. I understand that failure to comply with future requirements (such as spaying/neutering) or declawing, could result in my inability to adopt other animals from New Beginnings Animal Rescue. I also understand that New Beginnings Animal Rescue has the right to deny any adoption for any reason.

Printed Name: _____

Signature: _____

Date _____