

PAWS Use Only!

Adoption DATE / / CAT() ADOPTED FEE(S) + DONATIONS = TOTAL Check #
Cash (please circle)

Approved By PAWS Representative Approval Date / / Adoption Completed By PAWS Representative

 Denied - Notes/Reasons



Application Date **Clarion PAWS Adoption Application**

Return to: ClarionPAWSAdoptions@Gmail.com

Applicant's Name:

Email: Cell Phone: () Land Line: ()

 Street City State Zip code

Co-Applicant's Name: Phone ()

Please list everyone living in your household (including children & their ages)

- Please tell us why you are interested in adopting a cat: As a gift Mouser Barn cat
 For children Companion for Pet Companion for self/family Other
- What type of cat you are interested in: Kitten Young Adult Senior Special Needs
- What Lifestyle will your cat have: Indoors Indoors & Outdoors Outdoors Barn
- Is there a specific cat(s) you are interested in?
- Are you planning on having your new cat declawed?

REFERENCES

Your Personal Reference

Your Veterinarian's Information

Your Landlord's information

<u> </u> NAME	<u> </u> NAME	<u> </u> NAME
(<u> </u>) CELL PHONE #	(<u> </u>) PHONE #	(<u> </u>) CELL PHONE #
(<u> </u>) LAND LINE #	<u> </u> NAME OF OWNER ON ACCOUNT	(<u> </u>) LAND LINE #

PAWS <u> </u> / <u> </u> / <u> </u> DATE	<u> </u> CONTACTED BY	<u> </u> / <u> </u> / <u> </u> DATE	<u> </u> CONTACTED BY	<u> </u> / <u> </u> / <u> </u> DATE	<u> </u> CONTACTED BY
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● Under what circumstances would you **not** keep your cat? (please check all that apply)

- | | | |
|---------------------------|--------------------------------|---|
| <u> </u> New Baby | <u> </u> Move | <u> </u> Cat's Behavior (please specify behavior)
<u> </u> |
| <u> </u> Your Illness | <u> </u> Divorce | <u> </u> |
| <u> </u> Allergies | <u> </u> New Pet in home | <u> </u> Other (please specify reason)
<u> </u> |
| <u> </u> Cat's Illness | <u> </u> There is No Reason | <u> </u> |
| <u> </u> New Job | <u> </u> I would give it up | <u> </u> |

Current pets in your home:

Name of Pet	Age	Type of Animal (Cat/Dog/etc.)	Are they Fixed ?	Current on vaccines?	Do they go outside?
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

- Do you currently have cats living in your home ? _____

If yes, are they:

- Feline Leukemia (FeLV) Negative? _____
- Feline Immunodeficiency Virus (FIV) Negative? _____
- Current on all of their vaccinations? _____



- Have You Previously Owned Pets? _____

If yes, why are they no longer with you? _____

- What arrangements have you made for your pets in the event of your death or in case you can no longer care for them? _____

Adoption & Care Considerations:

- If your adopted cat should develop behavioral problems (scratching, not using the litter box, etc.), are you willing to work through the problems with your cat? _____
- Do you expect any of your current pets to have trouble adjusting to a new cat in the house ? _____
If yes, what measures will you take to help with the adjustment or if there is a problem? _____
- Do you accept responsibility for ensuring all animals in your home see a vet at least yearly? _____
- How much would you estimate your annual expenses for a cat to be? _____
- If your pet should become ill, can you afford veterinary expenses? _____
- Who will be responsible for the daily care of the cat? _____
- Is anyone in your household allergic to cats? _____
- Do You Travel? _____
- Are you Responsible for Military Duty? _____
- If "Yes" to either of these questions, who will provide for your animal(s) in your absence?

- Do you rent or own your home? _____

If you rent your home:

- Is there a security deposit required per pet? _____
- How many pets are you allowed to have at your rental property? _____
- Would you consider moving to a rental property that doesn't allow pets? _____