**Karmic Connections Animal Rescue**

**APPLICATION FOR CAT ADOPTION**

**Return to karmicrescues@gmail.com**

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| Applicant nameAddressCity, State: ZIP: Home phone:Work phone: Home e-mail: Work e-mail: Employer: Occupation: |
| 1. Name of cat you are interested in:
2. What type of cat are you interested in?
	1. ❑ Male ❑ Female ❑ Kitten (under 5 months) ❑ Adult
	2. ❑ Long Hair ❑ Short Hair
	3. Color:
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| 1. How many people currently reside in your household?
2. Any children in the household? ❑ Yes ❑ No List ages:
3. For whom are you adopting the cat? ❑ Self ❑ Gift
4. Does any member of the family have any allergies to animals? ❑ Yes ❑ No  If yes, explain:
5. Who will be responsible for the cat’s care?
6. Where do you live? ❑ Apartment ❑ Condo ❑ Farm ❑ Mobile home ❑ Townhouse ❑ House
7. Do you own or rent your residence? ❑ Own ❑ Rent If you rent,
8. If you rent, what is name of landlord and phone number?
9. Are companion animals allowed? ❑ Yes ❑ No ❑ Not sure
10. Where will the cat be kept? ❑ Indoors only ❑ Outdoors only ❑ Both in/out
11. If outdoors, will the cat be ❑ attended ❑ unattended ❑ collar & tags?
12. Will anyone be home during the day? ❑ Yes ❑ No
13. How many hours will the cat be left unattended?
14. When no one is home, where will the cat be kept?
15. If you move, what will you do with the cat?
16. How far from the road/traffic is your home/farm located?
17. Is the volume of traffic ❑ light ❑ moderate ❑ heavy?
18. Have you ever had a companion animal before? ❑ Yes ❑ No
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| 1. Describe those companion animals you still care for or that are living in your household.
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| 1. Describe those companion animals you no longer care for and why:
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1. Are your companion animals current on their vaccinations? ❑ Yes ❑ No
2. Please provide name of your veterinarian:
3. Please provide telephone number of your veterinarian:
4. Are you financially able and willing to provide annual checkups, vaccinations, and ANY medical care necessary? ❑ Yes ❑ No
5. If you have a dog, is he/she permitted to run loose? ❑ Yes ❑ No 26.
6. 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.)?
7. Do you need/want assistance in introducing cats to a new home?
8. What will you do if your new cat does not get along with your present companion animals?
9. Are you planning on declawing? ❑ Yes ❑ No ❑ Not sure 29. Have you ever adopted an animal from a rescue/animal control agency? ❑ Yes ❑ No
10. Have you ever had an application rejected for adoption of an animal from a rescue/animal control facility? ❑ Yes ❑ No If yes, explain:
11. Why do you want to adopt a cat
12. If a disciplinary or behavior problem arises, what steps will you take to work on it?
13. Are you familiar with your local animal control laws? ❑ Yes ❑ No 34. Are you willing to sign legal pet adoption papers? ❑ Yes ❑ No 35. Do you agree to permit a visit to your home/farm by appointment? ❑ Yes ❑ No

**By signing this form, I/we acknowledge that all information on this form is true and correct. I/we understand that any misrepresentation of fact may result in KCAR refusing adoption privileges to me/us. If my/our request for adoption is approved and later KCAR discovers the above information is not true or correct, KCAR reserves the right to remove the adopted cat from my home/farm.**

**Signature**

**Date**