

Appin Cats Project

CAT ADOPTION/PRE-ADOPTION APPLICATION

Before you submit your application, please note:

We cannot guarantee the temperament of our animals. Most animals come to us with only the background history that we can deduce from its rescue. We disclose any information that we discover during continued behaviour assessment and observation, however this still does not guarantee your pet's continuing temperament, as temperament is often an effect of environment and circumstance.

We cannot guarantee the continued health of our animals. We disclose observations that are revealed during the animal's veterinary exam and through ongoing observation while in our care. Do know that we have made every effort to provide a healthy, well-adjusted feline companion for you and your family.

IMPORTANT INFORMATION:

All adopters are responsible for veterinary care and medical bills incurred post adoption. If, for whatever reason, you must re-home your new pet, you must first contact Appin Cats, who reserve the right to reclaim guardianship upon surrender.

Appin Cats reserves the right to verify all information provided on the adoption application (veterinary reference, landlord, etc.).

Appin Cats PreAdoption Program *(applicable to all kittens 6 months or younger)*

Most rescue organizations will spay/neuter and vaccinate at 2 months of age or 2lbs, but because of the way that we vet our cats, this is not a viable option for us. The veterinarians at Mount Brydges Animal Clinic perform spay and neuter procedures after the age of 6 months, when the kitten has sufficiently matured and developed.

Kittens are available to be brought home after they have been weaned from their mother (approximately 2 months) and successful applicants can take possession of their adoptive kitten at that time.

The Appin Cats Project schedules one to three visits for your adopted feline, depending on its stage of vaccination. You will be consulted ahead of time for these appointments, and you will NOT be required to pay any more than your original adoption fee; after your little one is spayed or neutered, the veterinarian is given updated adoption information, and at that point your adoption is complete, and you will receive regular reminders from the vet for vaccinations and health checks.

To be clear:

- a successful PreAdoption means that you take possession of your new family member while still a kitten.
- you will be consulted for convenient appointments – up to 3 in total – to have kitten vaccinated, microchipped, and spayed or neutered. You will be required to bring your feline to the Mount Brydges Animal Clinic for these appointments.
- all communication and scheduling is coordinated through the Appin Cats Project. Any questions or concerns can be addressed to us. Contacting the Animal Clinic before the final appointment is strongly discouraged.
- there are no exceptions or substitutions to these conditions. The extra work that PreAdoption creates for us is for the benefit of our adoptive families and our kittens. We ask that you respect these conditions to ensure a successful adoption.

By signing below:

- I certify that the information I have provided in this application is true and I recognize that any misrepresentation of facts may result in my losing the privilege of adopting a pet from The Appin Cats Project.
- I understand that The Appin Cats Project has the right to deny my request to adopt an animal and that The Appin Cats Project does not adopt animals on a first come, first served basis.
 - I authorize investigation of all statements contained in this application.
 - I understand that this application is the property of the The Appin Cats Project.

To accept and acknowledge the special terms and conditions of kitten pre-adoption policy (if applicable), please initial this box:

Signature

Date

Your responses remain confidential.

The Appin Cats Project
CAT ADOPTION APPLICATION

CAT'S NAME: _____

APPLICANT INFORMATION

Name:	Age:	Email:
Address:	City/Town	
Postal Code:	CellPhone#:	Home Phone#:
Employer:	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/>
Co-Habitant's Name:	Age:	Email:
CellPhone#:	Home Phone#:	
Employer:	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/>

FAMILY/LIFESTYLE

What type of home do you live in?
House Apartment Mobile Farm Duplex Student Residence

Do you: rent own Live with parents Do you have roommates: yes no

How long have you lived at your current address?

How many times have you moved in the past 5 years?

If you were to move in the future, what would happen to your cat?

If you rent, please provide contact information for your landlord.
Name: _____ Phone Number _____

How many children live in your home: _____ Ages: _____

How would you describe your household?
Loud Calm Busy Quiet

Does anyone in your home suffer from pet allergies? Yes No
(If planning to have a family, consider the possibility of allergies developing in your newborn BEFORE adopting a cat.)

If your current relationship changes, with whom will your cat remain?

Do you have someone who can look after your cat in the event of serious illness/death?

Is this cat going to be: Indoor only Outdoor only Indoor/outdoor

Have you ever owned a pet that is no longer with you? (If so, please explain why):

Have you ever surrendered a pet to a Humane Society/OSPCA? If so, please specify which pet:

The Appin Cats Project

CAT ADOPTION APPLICATION

PET CARE/COMMITMENT

Are you adopting this cat for yourself or someone else? (Please specify)

Why are you adopting a cat? (Check all that apply)

Companion for family

Teach child responsibility

Companion for existing pet

Barn cat

For what reason would you return/re-home your cat?

Allergies

Moving

Separation/Divorce

New baby

Behavioural issues

Large veterinary bill

Not getting along with current pets

Chronic medical issues

Urinary Issues

Does not apply

Aggression issues

Death in the family

Other (please explain):

Are you prepared to make the 15-20 year commitment a cat requires? Yes No

How much do you think it costs to feed one cat for one month? (Keep in mind! Some cats may require a specialized diet)

When traveling/away from home, what arrangements will you make for the care of your cat?

Who in your household will be responsible for caring for this cat?

What kind of behaviours would you not tolerate from your new cat? (ie: scratching furniture/not using litter box)

Have you ever applied for a pet before from any other shelter? If so, which pet? Were you successful?

Have you ever been investigated by the Ontario SPCA?

MEDICAL CARE

How much will you budget for basic veterinary care per year? (please consider annual checkups, vaccines and preventative/emergency care)

Do you plan on declawing your cat? (we do not endorse or promote this procedure)

Yes

No

Are you comfortable administering medication to your cat should it become ill? (ie: pills, eye medication, injections)

Yes

No

Do you believe in spaying/neutering? Yes

No

REFERENCES

If you do not have a veterinary reference, please provide 2 character references instead.

Name	Relationship	Contact Number

The Appin Cats Project
CAT ADOPTION APPLICATION

PET CARE/EXPERIENCE

Tell us about your current pets:

SPECIES	NAME	SEX	ALTERED	AGE	VAX STATUS	DECLAWED

Tell us about your previous pets:

SPECIES	NAME	SEX	ALTERED	AGE	VACCINE STATUS	DECLAWED

Please list each veterinary clinic that has cared for your animals:

NAME OF CLINIC	NAME OF VETERINARIAN(S) DEALT WITH	TELEPHONE NUMBER	CLIENT'S NAME UNDER WHICH THE PET'S RECORDS ARE LISTED