

Animals for Life, Inc. ADOPTION APPLICATION FORM

P.O. Box 1481 Naugatuck, CT 06770 (203) 267-6777 • contact@animalsforlife.org www.animalsforlife.org

Please Note: This application is subject to approval. Please answer all questions to the best of your ability. Incomplete applications will not be considered. You MUST be 21 years of age or older to apply for adoption. Please be advised that Animals for Life is a private rescue organization and reserves the right to deny your application if it feels this would be in the best interest of the animal. The information you provide will be verified by an Animals for Life volunteer. If your application is accepted, an Animals for Life adoption coordinator will contact you. We receive multiple applications for each animal to allow us to find the best placement. If you do not receive a call within 10 days, please assume your application was not accepted.

Please fax completed forms to 203-663-3926 or scan and email forms to <u>contact@animalsforlife.org</u>

| Date of Application: | | | | |
|---|------------|----------------|--|--|
| Name of Animal(s) You're Applying For: | | | | |
| CONTACT INFORMATION | | | | |
| Name of Applicant: | | Date of Birth: | | |
| Street Address: | | | | |
| City/Town: | | | | |
| Main Phone #: | Cell Phone | e #: | | |
| Email Address: | | | | |
| HOUSEHOLD AND PET INFORMATION | | | | |
| How long have you lived at the address you provided above?: | | | | |
| Do you live in a house, apartment, condo, or other?: | | | | |
| Do you own your home, rent, or live with a parent?: | | | | |
| If you rent, do you have your landlord's permission to house this cat?: | | | | |

NOTE: If you rent, please attach a copy of your rental's pet policy or attach a copy of the pet application you filled out for your rental to this adoption application.

| Contact info for landlord/management company: |
|---|
| Are you applying to adopt for yourself or someone else?: |
| Why do you want this cat? Please check all that apply: Companion Office/work cat |
| How many adults live in your home?: How many children?: |
| Have all household adults agreed to accept this pet into your home?: |
| What is the age range of children living in and/or visiting your home?: |
| How would you describe your household?: Active Noisy Average Quiet |
| What kind of cat would you like to adopt?: |
| Age Range: Sex: Coat Length: |
| I prefer a cat that would like to live: Indoors Outdoors Indoor/Outdoor |
| Will your cat have access to a litter pan(s)?: |
| Where would the litter pan be kept?: |
| Have you ever owned a declawed cat? If yes, did your vet declaw your cat or was the cat declawed prior to you owning it?: |
| Under what circumstances would you consider de-clawing your cat?: |

Who will be responsible for most of your cat's care?:

| What is your current occupation?: |
|--|
| About how many hours per day will the cat be left alone in your home?: |
| Does your job require extensive travel?: |
| Who will care for your pet if you go on vacation/travel?: |
| What arrangements will you make for the care of your pets in case of an emergency, or if you become unable to care for him/her?: |
| If you move, will you take the cat with you?: |
| Do you have secure/intact screens on your windows?: |
| Do the exterior doors of your home (entrances and exits) have screen or storm doors?: |
| Are there any specific behaviors that would cause you to give up your pet? (Including litter box training issues, scratching furniture, nipping/biting, etc.) If so, please explain: |
| |
| If you were to encounter these behavior problems, what steps would you take to correct the behavior?: |
| What steps would you take to prevent your new cat/kitten from scratching inappropriately |
| in the home?: |
| |
| Do any members of your household have cat allergies?: |

What would you do if someone in your household became allergic?:

Do you currently have any pets? If yes, what species and how many of each?:

Please list pets you have owned in the last 10 years. Include whether current or past / species / age / length of time owned. If you no longer have the pet, please tell us what happened to them:

CHARACTER AND REFERENCES

Current or past veterinary hospital that has treated your pets:

| Vet Name: | | |
|---|----------|--|
| Town/State: | Phone #: | |
| Pets treated by this vet: | | |
| How long has this vet treated your pets?: | | |
| | | |
| Vet Name: | | |
| Town/State: | Phone #: | |
| Pets treated by this vet: | | |
| How long has this vet treated your pets?: | | |
| | | |

Would you be willing to have your veterinary information released to us?:

NOTE: You must contact the veterinarians you have listed on this application to give them permission to speak to a representative of Animals for Life. Failure to do so may result in the denial of your application.

If you've never owned a pet before or have not owned one is the past 10 years, please list two personal references (preferably that are not related to you) whom you have known at least 2 years. Please let these references know that an Animals for Life representative will be contacting them.

| Reference 1: Name: | Phone #: |
|--------------------|--------------|
| Relationship: | Years Known: |

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| Reference 2: | Name: | Phone #: |
|--------------|---------------|--------------|
| | Relationship: | Years Known: |

Will you allow an Animals for Life volunteer to conduct a home visit prior to adoption?:

Have you ever been convicted of or arrested for a felony or misdemeanor associated with animal abuse, neglect, or abandonment?:

CERTIFICATION

I have read and understand the questions on the application and recognize that any false, deceptive or missing information may be cause to void the application. I also understand that Animals for Life is a private organization and may reject my application if it feels it will be in the best interest of the animal. I give my permission to Animals for Life to verify all information on the application and to visit my residence before finalizing the placement. I also understand that the animal I am applying for may have been abandoned, surrendered, born outside or removed from a shelter and therefore Animals for Life may have limited information regarding the animal's background. I understand, and by signing the application, hereby agree, that information obtained on this application may be shared with other animal organizations or companies that are animal related. I certify that I am at least 21 years of age. I understand that I will be required to provide a donation upon adoption. I understand that Animals for Life has a follow-up program that requires it to check on the animal following adoption. By signing below, or submitting this form via email I certify the truth and completeness of all information I have supplied.

Signature

Date