

Mt. Pleasant Animal Shelter Cat/Kitten Adoption Application



We realize there are a lot of questions to answer. Please understand they are all for the best interests of yourself and the cat for which you are applying. We wish for the cat and the adoptive family alike to be content with the decision, and want it to result in a permanent placement. Thank you for understanding.

General Information

To be considered for an adoption you must (please check):

I am at least 18 years old Have the knowledge and consent of all adults in household Have a valid ID with current address

Why would you like to adopt a pet?

Companion (Self) Companion (Other Pet) For Children Gift for Someone Else

Other _____

Name: (Please Print) _____ Date: ____/____/____

Address: _____ City: _____ ST: _____ Zip: _____

Phone: (Work) _____ Home: _____ Cell: _____

Email Address: _____

Do You: Work Employer _____ Spouse's Employer _____

Attend School _____

Household Information

Do you: Own Live with Parents Rent

Would you give MPAS permission to do a home visit?: Yes No

Do you Live in: House Condo/Townhouse Apartment Dorm

of Adults (over 18 Years): _____ # of Children (Under 18 Years): _____ Ages of Children: _____

How long have you been at your current address? _____ Years _____ Months

If less than 1 year, please list your previous address below. How long at the previous address? _____ Years _____ Months

Address: _____ City: _____ ST: _____ Zip: _____

Do any members of your household have allergies? Yes No Please List: _____

Do you plan to move in the near future? Yes No If yes, what do you plan to do with your pet? _____

I'm looking for a cat that....

Gets along with other cats: Yes No Doesn't Matter

Is good with children: Yes No Doesn't Matter

Can live with dogs: Yes No Doesn't Matter

It's okay if my cat plays rough sometimes:
(ie: chases my feet, play nips) Yes No Doesn't Matter

I am looking for a cat that is (please check all that apply)

Mellow Semi-Active Very Active Independent Cuddles Sometimes A Lap cat 24/7

I am looking for a cat that is (please check all that apply)

An indoor cat An indoor/outdoor cat An outdoor cat

I am looking for a cat that can live in a home that

Is quiet with little entertaining Is semi-active with some visitors stopping by Is a family circus

Rental Information

Landlord's Name _____
Landlord's Address: _____ City: _____ ST: _____ Zip: _____
Landlord's Phone: _____

Pet Care Information

How did you hear about us? _____ Have you previously adopted from **MPAS**? _____

Who will be primarily responsible for the care (feeding, grooming, exercise and training) of your new pet?

Adults Children Pet Sitter Other _____

How many pets do you have now? _____ Dogs _____ Cats _____ Other (List Kind) _____

How much time will your pet be alone (without human companionship) _____ Hours _____ Days a week

Where will your pet stay during the day?

Inside House (Loose) Inside House (Crated or Tied) Garage/Porch Outside Inside and Outside

Where will your pet stay at night?

Inside House (Loose) Inside House (Crated or Tied) Garage/Porch Outside Inside and Outside

Do you plan on de-clawing your new cat/kitten? Yes No

Do you have any contingency plans in place for your new pet if something were to happen to you? Yes No

If yes, please list plan: _____

Pet Ownership History

Please list any pets you have now or have had in the **past 10 Years**

Name	Type/Breed	Age	Sex	Spay/Neuter	Why you no longer have
_____	_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
_____	_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
_____	_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
_____	_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N	_____

Veterinarian Information History (Please note the name of the animal that has been seen by each vet listed)

Name: (Please Print) _____ Phone: _____
Address: _____ City: _____ ST: _____ Zip: _____
When was the last visit to the veterinarian provided above? _____

Pet Adoption Agreement

- I am willing to make a 10-20 year commitment to my new pet Yes No
- I will take my pet for annual veterinarian visits for a wellness exam and test/vaccinations, and when needed for injury, illness, etc. Yes No
- I will keep my pet on regular flea/tick control Yes No
- If I adopt a Mt. Pleasant Animal Shelter Pet and it does not work out in the future, I agree to notify Mt. Pleasant Animal Shelter **prior** to transferring ownership of the animal to another person. Yes No

I hereby release to Mt. Pleasant Animal Shelter access to all veterinary and town license records of any and all my animals I own or have owned. I certify that all the information in this application is true, and I understand that false information may void the application. All adoptions are finalized at the discretion of Mt. Pleasant Animal Shelter. Mt. Pleasant Animal Shelter reserves the right to refuse any adoption. Completion of this application in no way guarantees acquisition of a pet. Mt. Pleasant Animal Shelter has completed an initial temperament test, veterinary check, spayed/ neutered, and updated the vaccinations of the animal; however we do not guarantee the future health or temperament of any animal.

Signature: _____ Date: _____

Adoption Counselor: _____ Date: _____

Adoption Notes: _____