|  |  |
| --- | --- |
|  |  BAY COUNTY ANIMAL SERVICES & ADOPTION CENTER |

# CAT ADOPTION APPLICATION

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | AGE |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

|  |  |
| --- | --- |
| Animal applying for: |  |

**Have you had cats before? YES NO**

**Briefly tell us why you are interested in this cat?**

**If it is a kitten do you understand that kittens take a lot more care than an adult cat? YES NO**

**If there are other cats in your home you understand that there may be an adjustment period that can take longer than 2 weeks? YES NO**

**What are your places for this cat? House Pet Barn Cat ESA Other**

**If you have a dog do you understand that the cat(s) & dog(s) may take some time to adjust to each other so you will supervise the time the cat(s) is with the dog(s) you will not leave the cat(s) alone with the dog(s)?**

**YES NO**

## INFORMATION ON CURRENT PETS

**CURRENT PETS:**

|  |  |  |  |
| --- | --- | --- | --- |
| **NAME:** | **BREED:** | **AGE:** | **STERILIZED?** |
| **NAME:** | **BREED:** | **AGE:** | **STERILIZED?** |
| **NAME:** | **BREED:** | **AGE:** | **STERILIZED?** |
| **NAME:** | **BREED:** | **AGE:** | **STERILZED?** |
| **NAME:** | **BREED:** | **AGE:** | **STERLIZED?** |

Please list any pets you have in the past 5 years that have passed away or you gave away. If you gave the pet away please states as to why

## VETERINARIAN REFERENCE

|  |  |
| --- | --- |
| **VETERINARIAN:** | **PHONE:** |

|  |
| --- |
|  |

**If the Veterinarian records could be under another name please provide that name below:**

## HOUSING INFORMATION

**Do you live in: House Apartment Mobile Home Other**

**Do you: Own Rent Live With Parents/Family Member Other**

**If you rent you will need to provide your landlord‘s name & phone number this includes Trailer Parks & Apartment Complexes**

**Landlord’s or Property Manager’s Name: Phone#**

**How many live in the home? Adults: Children: Ages of the Children:**

**Are there any family members who need special consideration for any reason?**

**If so can you please explain:**