



Cat Adoption Application

Pet ownership is a serious commitment that the entire household needs to consider and agree to before the animal is adopted. We want to ensure that each adoptive household is aware of and willing and able to accept the physical and financial responsibilities of pet ownership.

This application will assist both you and us in determining if your household is prepared to assume the role of responsible caretaker for a shelter animal. **Please note that applying does not ensure approval.** GHS reserves the right to refuse adoptions to anyone. No animal will be adopted to someone who misleads or fails to provide accurate information on the adoption application.

I'm Interested in adopting _____

Last Name	First Name	Are you over 18 years?	Today's Date	
Address		City	State	Zip
Home Phone	Cell Phone	Work Phone	Message Phone	
Email Address:				
1. What made you decide to adopt from GHS?				
2. Why do you want a cat?				
3. Why did you choose this particular cat?				
4. Are you: <input type="checkbox"/> 1st time cat owner <input type="checkbox"/> had cat(s) before <input type="checkbox"/> experienced (more than two)				
5. How much are you budgeting for your cat (food, vaccinations, etc.) \$_____ yearly (approx.)				
6. Do you have a budget for emergency medical care, if needed?				
7. Which veterinarian will you go to for annual boosters and other medical care?				
8. Who will be the primary caretaker of the cat?				
9. Have you discussed cat ownership with <i>all</i> people living with you?				
10. How many people live in your household?				
11. Do you live with: <input type="checkbox"/> Parent <input type="checkbox"/> Spouse <input type="checkbox"/> Roommate(s) <input type="checkbox"/> Children <input type="checkbox"/> Alone <input type="checkbox"/> Other				
12. Is there anybody in your household with allergies? If yes, what kind?				
13. Are you, and those who live with you, committed to spend 12+ years providing health care, food, grooming and attention?				



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14. Are there lifestyle altering events that could occur in your foreseeable future?
(i.e., baby, moving, caring for elderly, divorce, job uncertainty)

15. This cat/kitten will be: inside only outside only both?

16. How are you going to litter box train your cat?

17. Where will the litter box be located?

18. **A kitten is required to stay inside until it is 6 months of age, altered and fully vaccinated.** Are you able to keep this kitten inside only for the first six months? Yes No Why not?

19. Where will your cat be during the day?
At night?

20. Where will the cat be kept while alone?
While you are home?

21. What will you do with your cat while you are away on vacation or out of town?

22. What problems would make you return an animal?
 Scratching furniture chewing marking shyness/fear
 not getting along with other animals other (explain)

23. If this cat does not get along with your other pets, what will you do about it?

24. What are you planning to feed your cat?

25. Spaying and neutering is mandatory when adopting from GHS. When do you plan to spay or neuter the cat if it has not been done?

26. Have you ever brought an animal to a shelter? If yes, why?

27. Have you ever given an animal to another person? If yes, why?

If you are currently the owner of other pets, please provide the following information:

Type of Animal	Breed	Sex	Age	Vaccines Current?	Altered	Where kept? Exact location please (e.g., garage, run, etc.)



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28. Do you rent? Y N Do you own? Y N House Apartment Mobile Home Condo

29. Is the lease/contract in your name? Y N

If you rent, or have a lease option, we *will* need to contact *your* landlord

Landlord's Name/Management Co. _____

Address: _____ Phone #: _____

Authorization: _____ By: _____

I am aware that the actions of the animals are often unpredictable; that animals should be closely supervised when with children; that animal's behavior may change after it leaves the shelter and adjusts to a home.

Applicant's Signature

Today's Date

For Office Use Only

Driver's License #: _____ Receiving #: _____ Adoption #: _____

I.D. Tag: _____ Line Co. License #: _____ Interviewed by: _____

Animal Description: _____

ID verification-----

Address verified-----

Landlord verification----- N/A

Spay/Neuter date-----

Approval ----- Yes No Interviewed by: _____

Reason for denial: _____

Please complete all 3 pages and return to
Greenhill Humane Society/SPCA
88530 Greenhill Rd. Eugene, OR 97402
or fax to 541-689-5261



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