



## Cat Adoption Questionnaire

Pet guardianship 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, willing, and able to accept the physical and financial responsibilities of pet guardianship.

This questionnaire will assist you and Greenhill in determining if your household is prepared to assume the role of responsible caretaker for a shelter animal. This questionnaire will also assist you and Greenhill in determining if the cat you would like to adopt is a good fit with your family and your lifestyle.

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	

Enter email address here:

\_\_\_ I consent to provide email address to Hill's Science Diet and be included on Greenhill's monthly e-newsletter list.

1. What are your expectations for the cat you have chosen to adopt (cuddler/lapcat, playmate for family/other animals, hunter/shop cat, etc.)?

2. How much time was spent with the cat you have chosen to adopt?

3. If you are interested in adopting a kitten (under 6 mos. of age), briefly tell us of your previous experience with kittens.

4. Are you:  1st time cat owner     had cat(s) before     experienced (more than two)

5. What expenses are you planning for this cat over the course of a year? (food, litter, etc.)

6. At some time in their lives, all animals have emergency medical issues. What is your plan for financing when such an emergency arises?



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7. Which veterinarian will you go to for wellness exams and other medical care?
8. Who will be the <b>primary</b> 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"/> Partner <input type="checkbox"/> Spouse <input type="checkbox"/> Roommate(s) (how many?) _____ <input type="checkbox"/> Alone <input type="checkbox"/> Other <input type="checkbox"/> Children (how many?) _____ (what ages?) _____ How long have you lived at your current residence? _____
12. Is there anyone in your household with animal related allergies? If yes, what kind?
13. Are you, and those who live with you, committed to spending 12+ years providing health care, food, grooming and attention to this cat?
14. Considering that lifestyle altering events happen to all of us (moving, baby, caring for elderly, divorce, job uncertainty, etc.), what will you do with this cat?
15. If something happens to you and you are no longer able to care for this cat, who will take care of this cat?
16. Briefly describe your lifestyle (active, quiet, many visitors, homebody, away a lot, etc.).
17. This cat/kitten will be: <input type="checkbox"/> inside only <input type="checkbox"/> outside only <input type="checkbox"/> both



18. If you answered “outside only” or “both” for the question above, please explain how you will introduce this cat to the outdoors?

19. To the best of our knowledge, all cats adopted from us are reliably using the litter box. However, some cats may have an adjustment period in their new home and will need to be reintroduced to the litter box. Please explain how you will introduce this cat to the litter box in your home. What type of litter do you use? How many boxes will you have available to the cat? Where will the litter box(s) be located?

20. **A kitten is required to stay inside until he/she is 6 months of age and fully vaccinated.** Are you able to keep this kitten inside only for the first six months?  Yes  No If you answered “no”, please explain to us why not?

21. Who will be with this cat during the day?

Where will your cat be during the day?

At night?

22. Where will your cat be kept while alone?

While you are at home?

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



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24. Please understand that scratching or marking of territory are two of many “normal” cat behaviors that may not always be desirable to the human who adopts the cat. Tell us what you would do for this cat if he/she exhibits any of the following behaviors in your home:

Cat is scratching furniture.

Cat is not using the litter box properly.

Cat is not getting along with other animals.

Cat is shy, fearful or biting.

25. If you have other companion animals in your home, please tell us how you will introduce the new cat to them?

26. What brand of cat food will you be feeding? Canned, dry, or both?

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

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

If you are currently the owner of other companion animals, or live with other companion animals, please provide the following information:

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



29. How did you learn about this pet/shelter?

Event  (where?) \_\_\_\_\_ TV/Radio  (which station?) \_\_\_\_\_ Store  (which one?) \_\_\_\_\_

Flyer/Advertisement  (where?) \_\_\_\_\_ Newspaper  (which one?) \_\_\_\_\_

Facebook  (which page?) \_\_\_\_\_ Website  (which one?) \_\_\_\_\_

30. Do you (circle one) Rent or Own your residence?

Live in:  House  Apartment  Mobile Home  Condo

31. 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/Management Co. name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Authorization: \_\_\_\_\_ By: \_\_\_\_\_

**I am aware that the actions of animals are often unpredictable; that animals should be closely supervised when with children; that the animal's behavior may change after he/she leaves the shelter and adjusts to a home. \_\_\_\_\_ (Initials)**

**I have answered all above questions truthfully and to the best of my knowledge. Greenhill Humane Society has the right to deny this application if any answer is found to be untruthful or purposefully misleading.**

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Today's Date**

**For Office Use Only**

Driver's License #: \_\_\_\_\_ Receiving #: \_\_\_\_\_ Adoption #: \_\_\_\_\_

Animal Description: \_\_\_\_\_

ID verification  Address verified  Landlord verification  N/A Spay/Neuter date

Approval -----  Yes  No Interviewed by: \_\_\_\_\_

Reason for denial: \_\_\_\_\_

Please complete all 6 pages and return to  
**Greenhill Humane Society** 88530 Greenhill Rd. Eugene, OR 97402 or fax to 541-689-5261



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24PetWatch provides each adopter who meets specified requirements the ability to sign up for a 30 day free trial of pet health insurance. To be eligible to qualify for the Trial:

- dogs must be between the ages of 8 weeks and 10 years and cats must be between the ages of 8 weeks and 12 years.
- dogs and cats must be microchipped and a valid email address must be included in the person's record prior to completing the adoption

Please take a moment to read the message from 24PetWatch and consent instructions below. If you agree, please initial the line below authorizing consent.

"Just like you take great care to ensure your furry family members are protected, we at Pethealth care about your safety and wellbeing. Our team at 24PetWatch are there with you through it all!

We are a proud partner in support of your shelter and would like your consent to reach out to you by phone, mail or email. These communications will be about the following:

- Information about your pet's microchip – essential to ensuring your pet can get home safe in the event they ever get lost

- 24PetWatch Insurance options that can help protect your pet and your wallet.

- Special deals and discounts on products and services and partner product and services.

We are dedicated to protecting your privacy and ensuring your personal information is kept current, confidential and secure. We are committed to strict guidelines of confidentiality and security to responsibly safeguard your information."

#### Acknowledgment and Consent to Communications:

I understand the disclosures read to me about the reasons Pethealth Services (USA) Inc. and PTZ Insurance Agency Ltd may call, mail or email me in the future. I understand that they may use automatic telephone dialing systems or pre-recorded/automated messages. These calls and their contents have been explained to me during the adoption process. I consent to receive these calls at the number I provided and acknowledge that I can decline to receive them in the future if I choose. I also acknowledge that my consent to receive these calls is not a condition of the purchase of any goods or services.

(initial here)\_\_\_\_\_ I consent to provide my contact information to 24PetWatch Insurance. (By providing your email you are consenting to receiving emails from 24PetWatch and qualifying your new pet for a 30 day trial of pet insurance.)



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