



PRE-ADOPTION APPLICATION

Thank you for considering opening your home to a homeless cat! We will do our very best to find the right cat for you. To do so, we need your input. Please take a few moments to carefully consider and answer the questions on this application. The decision to adopt a cat is an important one. To insure that both you and your new cat(s) will be happy for years to come, we need to discuss your situation and expectations. More importantly, we must assure that our cat(s) individual needs and personalities are considered.

In order to adopt, you must:

- Be at least 21 years of age
- Have written landlord consent
- Understand that **T.A.I.L.S.** has the right to deny your application for adoption

Please answer all questions:

Name: _____ Date _____ Age _____

Address: _____ City _____ State _____ Zip _____

Phone (H): _____ Phone (W): _____

E-Mail _____

- 1) Do you: Own home/condo _____ Rent home/condo _____ Live w/parents/roommates _____
- 2) If renting, what is the name and phone number of your landlord? _____
- 3) How long at current address? _____ Any plans to move? _____
- 4) How many adults live in your household? _____
4a) How many children? (*include ages*) _____
- 5) For whom are you interested in adopting this cat(s)? _____
- 6) Who will be responsible for the care and cost of the cat(s)? _____
- 7) How much money do you expect to spend on food/vet care for the cat(s) annually? \$ _____
- 8) What is the name and phone number of your veterinarian? _____

- 9) Does anyone in your household have any known allergies to cats? _____ If so, who? _____
- 10) Do you travel frequently? _____
10a) If so, who will care for the cat(s) when you are gone? _____
- 11) Where will the cat(s) be kept during the day? _____ At night? _____
- 12) Do you plan to allow your cat(s) to have kittens? Yes _____ No _____ Not Sure _____
- 13) Have you adopted before? _____ From what shelter? _____
- 14) How did you hear about us? _____
- 15) Have you ever had to bring an animal to a shelter? Yes _____ No _____
15a) If so, why? _____

16) What animals do you currently have in your household?

Name	Type/Breed	Kept Where?	Age	Sex	Sterilized
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

17) What animals have you owned in the past?

Name	Type/Breed	Kept Where?	Age	Sex	Sterilized
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

18) Reason for adopting? _____

19) What type of cat(s) are you looking for? Adult___ Kitten___ M___ F___ Declawed___

20) Do you plan on declawing your cat(s)? _____ If yes, why? _____

21) What type of temperament/personality in a cat(s) would best fit your household and lifestyle?

22) Would you be willing to have a home visit by a volunteer after you have adopted? _____
If not, why? _____

23) Please list three references:

Name	Relationship	Phone Number
_____	_____	() _____
_____	_____	() _____
_____	_____	() _____

T.A.I.L.S. requests a minimum adoption donation. This donation includes spaying or neutering. This cost does not cover medical care, boarding and food costs, etc., of your cat(s) and the many other felines we rescue each year. Please consider giving an additional donation to assist us with our rescue work.

Thank You! 3/10

Once completed - if before Saturday, March 20th: scan to tailsct@yahoo.com ...if Saturday March 20th or later – please bring with you to the event at Cannondale Animal Clinic, 481 Danbury Road, Wilton.