



Kootenay Animal Assistance Program Society (KAAP)

CAT ADOPTION APPLICATION

KAAP reserves the right to refuse this or any application

Animal Name: _____ **KAAP#** _____

Applicant Name: _____
(Please list complete names of all adult family members: _____)

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Physical Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail: _____

How did you hear of our animals? _____

Have you ever adopted or relinquished an animal before? Yes No

If yes, please explain:

Describe household members (# of people, age of children etc.): _____

Do you live in a house, apartment or attached dwelling? _____

Do you own or rent? _____

If you rent, do you have permission from your landlord to adopt a cat? Yes No

Landlord name and phone number (if applicable): _____

Have you ever been investigated for concerns regarding suspected animal abuse or neglect? Yes No

If yes, please explain and provide information regarding the outcome of the investigation.

Describe other animals that live in your home. (breed, age, spayed/neutered etc.)

Describe any animals you have had in the past. (What happened to them? How long did you have them?)

What do you consider acceptable reasons to give up a pet?

Does anyone in your household have allergies to animals? Yes No

Where will your cat stay when you are on vacation?

Who will be the main caretaker of this cat?

If you move in the future, what will you do with your pet(s)?

If your cat were to run away, what would you do to get him/her back?

Will you have annual veterinary check-ups for your cat? Yes No

Will your cat wear any identification? Yes No If yes, what type of ID would he/she have? _____

How much money are you prepared to pay per month on your cat? (Food, supplies, vaccinations, boarding, emergencies etc.)
\$ _____/month

Are you prepared to work on possible problems? (Scratching furniture, inappropriate elimination, etc.) Yes No

Describe your plan for this animal (where will it live: indoor, outdoor, or both?, where will the pet sleep at night?, where will the litter box (if any) be kept?, any restrictions in the house?)

Veterinarian's Name: _____

Clinic: _____

Address: _____

Phone: _____

Will you have your cat de-clawed? Yes No

Please provide at least three references with phone numbers and relationships to you.
Ideal references are neighbours, employers, teachers, obedience trainers, pet groomer etc.

1) Name: _____ Phone: _____

2) Name: _____ Phone: _____

3) Name: _____ Phone: _____

4) Name: _____ Phone: _____

****Please note, the typical cost of adopting a cat is \$130, senior cat \$50, or kitten is \$155.****

****We require payment in full when the animal leaves the foster home.****

This adoption fee is non-refundable.

After adoption, you will be personally required to provide, at your own expense, future vaccinations, de-worming, flea treatments and any other medical treatment as necessary for the life and health of this cat. Please initial _____

Signature of Applicant: _____

Date: _____