



CAT ADOPTION APPLICATION

Thank you for choosing to adopt a pet from TDHS!

Every animal and every home is unique. We are here to help you find the right pet.

We use this application as a starting point to match your lifestyle, needs, and experience with the animals we know so well. We are committed to finding each TDHS animal the right match.

Before you fill in your application, please note:

- *Most TDHS adoptions are handled as foster-to-adopt cases. Please familiarize yourself with the adoption process prior to submitting your adoption application.
- *THDS animals first come to the shelter either as strays; as a result of a cruelty investigation; or because they've been signed over by a previous owner.
- *We cannot guarantee temperament of our animals. Most animals come to us without any background history. We disclose any information that is given to us on a surrender form and what is discovered during a behavior assessment; however, this still does not guarantee temperament, as temperament is often an effect of environment and circumstance.
- *We cannot guarantee the health of our animals. We disclose observations that are revealed during an exam and information that is provided at the time of surrender.

IMPORTANT INFORMATION:

1. All adopters are responsible for veterinary care and medical bills incurred post adoption.
2. If for whatever reason, you must re-home your new pet, you must first contact TDHS.
3. TDHS reserves the right to verify all information provided on the adoption application (veterinary reference, landlord, etc.)

By signing below:

- * I certify that the information I have provided in this application is true and I recognize that any misrepresentation of facts or aggression towards staff may result in my losing the privilege of adopting a pet from TDHS.
- *I understand that TDHS has the right to deny my request to adopt an animal and that TDHS does not adopt animals on a first come, first served basis.
- *In the event that my application is approved, but another family was chosen for the pet I applied for, my application can be kept on file for up to 6 months.
- *I authorize investigation of all statements contained in this application.
- *I understand that this application is the property of the TDHS.
- *I understand that I will be contacted by phone and email throughout the adoption process with important info and shelter updates. If preference post-adoption is not to receive further emails, I may unsubscribe at any time.

Signature: _____ Date: _____

Thank you for your responses, all of which are confidential.

Please note: Due to the high number of applications we receive, ONLY the successful applicants will be contacted within 1-3 business days. There is a possibility of a lengthier process for special case animals.

**Timmins and District Humane Society
CAT ADOPTION APPLICATION**

CAT'S NAME:

APPLICANT INFORMATION

Name:	Age:	Email:
Address:	Town/City:	Postal Code:
Cell Phone #:	Work Phone #:	Home Phone #:
Employer:	Job Title:	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/>
Co-Habitant's Name:	Age:	Email:
Cell Phone #:	Work Phone #:	Home Phone #:
Employer:	Job Title:	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/>

FAMILY/LIFESTYLE

What type of home do you live in?
House Apartment Mobile Farm/Acreages Duplex Student Residence

Do you: Rent Own Live with parents Do you have roommates: Yes No

How long have you lived at your current address?
How many times have you moved in the past 5 years?
If you were to move in the future, what would happen to your cat?
If you rent, please provide contact information for your landlord. (without their consent, the application will not be fully processed)
Name: _____ Phone Number: _____

How many children live in your home? _____ Ages: _____

How would you describe your household? (Check all that apply)
Loud Calm Busy Quiet

What type of cat are you looking for? (Check all that apply)
Female Male Kitten (<6 months) Specialized care/medical case
Adult (1-6years) Senior (7+)

Does anyone in your home suffer from pet allergies? Yes No
If so, please specify allergies to what species:
(If planning to have a family, consider the possibility of allergies developing in your newborn BEFORE adopting a cat.)
If your current relationship changes, with whom will your cat remain?
Do you have someone who is prepared to look after your cat in the event of a serious illness/death?

Is this cat going to be: Indoor only Outdoor only Indoor & outdoor

Have you ever owned a pet that is no longer with you? (If so, please explain why):
Have you ever surrendered a pet to a humane society/rescue? If so, please specify the reason and which pet:

Timmins and District Humane Society

CAT ADOPTION APPLICATION

PET CARE/COMMITMENT

Are you adopting this cat for yourself or someone else? (Please specify)

Why are you adopting a cat? (Check all that apply)

Companion for family

Teach child responsibility

Other

Companion for existing pet

Barn cat

Explain: _____

For what reason would you return/re-home your cat?

Allergies

Moving

Separation/Divorce

New baby

Behavioural issues

Large veterinary bill

Not getting along with current pets

Chronic medical issues

Urinary Issues

Does not apply

Aggression issues

Death in the family

Other (please explain):

Are you prepared to make the 15-20 year commitment a cat requires? Yes No

How much do you think it costs to feed one cat for one month? (Keep in mind! Some cats may require a specialized diet)

When traveling/away from home, what arrangements will you make for the care of your cat?

Who in your household will be responsible for caring for this cat?

What training do you expect your new pet to already have down? (ie: no scratching of furniture, using the litter box, socialized)

Have you ever applied for a pet at our facility or any other Humane Society/Rescue? If so, which pet? Were you successful?

Will this pet be exposed to animals of family members/friends? If so, please specify:

MEDICAL CARE

How much will you budget for basic veterinary care per year? (please consider annual checkups, vaccines and preventative/emergency care)

Do you plan to declaw your cat? (Please be aware that extra fees will be included for this procedure) Yes No

Are you comfortable administering medication to your cat should it become ill? (ie: pills, eye medication, injections)

Yes No

Do you believe in spaying/neutering? Yes No

REFERENCES

Only complete this section if you do not have a veterinary reference. Please provide two character references instead.

Name	Relationship	Contact Number

**Timmins and District Humane Society
CAT ADOPTION APPLICATION**

PET CARE/EXPERIENCE

Will you be a first time pet owner? Yes No

***Please check box if veterinary records have been released:**

Tell us about your current pets: (Attach another page if needed)

SPECIES/BREED	NAME	GENDER & AGE	SPAYED/ NEUTERED	VACCINE STATUS	DECLAWED (CATS)

Tell us about your previous pets:

SPECIES/BREED	NAME	GENDER & AGE	SPAYED/ NEUTERED	DECLAWED (CATS)	LIVING/DECEASED	REASON FOR DECEASED PET/REHOMING OF PET

Please list each veterinary clinic that has cared for your animals:

NAME OF CLINIC	NAME OF VETERINARIAN(S) DEALT WITH	TELEPHONE NUMBER	CLIENT'S NAME UNDER WHICH THE PET'S RECORDS ARE LISTED

****In order for us to do a vet reference, you will need to contact all veterinary clinics used for current and previous pets. The vet clinic will not release any information without your consent. Please check off the box at the top of page if you have already contacted them in order to give them permission.**