



### Feline Adoption Information

Initial Adoption Costs (Unless Otherwise Marked on Kennel Card)

\$140 – Kittens less than 12 months

\$95 - Cats 13 Months to 7 years

\$25 – Senior Cats over 7 years

\$ 6 – Cardboard Carrier

***\*all cats must leave the shelter in a carrier***

#### **IN ORDER TO BE CONSIDERED FOR AN ADOPTION TODAY, YOU MUST:**

- 1. Be at least 18 years of age.**
- 2. Have legal identification with your current address.**
- 3. Be able to verify that you are allowed to have a Cat where you live.**
- 4. Be able and willing to spend the time and money necessary to provide the training, medical treatment and proper care for this Cat.**
- 5. Understand that the Auburn Valley Humane Society reserves the right to deny the adoption of any Cat for any reason.**

Animal guardianship is a major responsibility, and one that should not be taken lightly. In Auburn Valley Humane Society's ongoing effort to find the best possible homes for its animals, we ask that you take the time to fill out this questionnaire and expect to spend time discussing it with one of our adoption representatives before the adoption can be considered and completed.

Your Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ How long have you lived at this address? \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Address Type:  House  Apartment  Condo  Manufactured Home  Other \_\_\_\_ [ ] Do not Mail

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Secondary Cell Phone #: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Type: \_\_\_\_ Personal \_\_\_\_ Work

Cat you are interested in Adopting: Name: \_\_\_\_\_ Animal Number: \_\_\_\_\_

# Auburn Valley Humane Society Feline Adoption Questionnaire – Continued

## For AVHS

Today's Date: \_\_\_\_\_ AVHS Staff Member: \_\_\_\_\_

Date landlord (for renters), or parents (if applicant resides with parents) contacted: \_\_\_\_\_

Spoke to: \_\_\_\_\_ Permission Granted:  Yes  No

Do you live in a  House  Apartment  Condo  Manufactured Home  Other \_\_\_\_\_

Do you own the dwelling in which this Cat will live?  Yes  No

Do you reside with your parents or other adults who own the dwelling?  Yes  No

If so, please provide the property owner's name and phone number:

Property Owner's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

If you rent, please provide the name and telephone number of the landlord.

Landlord's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Did you secure permission from the property owner or your landlord to adopt a cat for this residence?  Yes  No  
If we cannot reach the property owner or your landlord at the time you complete this application, we will hold the cat for you until we have reached the landlord (if you rent) or your parents (if you reside with your parents). We will do this for a period not to exceed 24 hours. After 24 hours, the "hold" will be removed from this cat and it will become available for adoption to the general public.

1. Why do you want to adopt a cat?  Companionship For Me  For My Children  As a Companion for my Pet  
(Please circle all that apply)
2. Have you ever adopted from AVHS or any other shelter before?  Yes  No  
Exercise for Myself  Other \_\_\_\_\_  
If yes, when and where? \_\_\_\_\_
3. Have you ever turned an animal into any shelter?  Yes  No  
If yes, please explain: \_\_\_\_\_
4. Does anyone in the household have an allergy to cats?  Yes  No
5. Who will be primarily responsible for the cat? \_\_\_\_\_
6. Who will take care of the cat in your absence (i.e. vacation, emergencies)? \_\_\_\_\_
7. How much time do you plan on spending with this cat each day? \_\_\_\_\_
8. Do you plan to have this cat declawed?  Yes  No If yes, do you understand that declawing involves removal of the 1<sup>st</sup> knuckle and not just the nail tip as well as the potential side effects of such an operation?  Yes  No
9. How long do you plan to provide a home for this cat? \_\_\_\_\_
10. How much do you think it will cost each month to care for this cat? \_\_\_\_\_
11. Do you have pets at home?  Yes  No If yes, are they spayed or neutered?  Yes  No
12. If yes, please list your animals. Cats: \_\_\_\_\_ Dogs: \_\_\_\_\_  
Other: \_\_\_\_\_

Have they ever lived with cats before?  Yes  No

# Auburn Valley Humane Society Feline Adoption Questionnaire – Continued

13. Do you have pet experience other than your current animals?  Yes  No
14. If yes, please explain: \_\_\_\_\_
15. Do you have children in your home?  Yes  No If yes, how many? \_\_\_\_\_  
 Please circle ages of children: 0-6 7-9 10-12 13-16 17+
16. Other adults?  Yes  No How many? \_\_\_\_\_
17. Please rate your household activity level, by circling the most appropriate number below:  
 (1=Very Quiet, 3=Varies Daily and 5=Very Active)
- Quiet            1            2            3            4            5            Active

**(Please circle all that apply below)**

18. What age cat are you interested in?      Kitten      Adolescent      Adult      Senior      Depends  
 (0-12 mos.)      (12mo.-2 yrs.)      (2-8 yrs.)      (9+ yrs.)      on the cat
19. I want my new cat to be:      Active      Calm      Confident/Outgoing      Independent      Lap Cat  
    Good w/Other Cats      Playful      Able to Travel      Good w/Kids      Other: \_\_\_\_\_
20. What qualities are important to you in a cat?  
    Easygoing      Easy Care      Easily Trained      Ready to go, go, go!      Happy Go Lucky      Housebroken  
    Responds to Commands      Cuddly/Snuggly      Loves All People      Loves Other Animals      Quiet, Doesn't Meow A Lot
21. What times of day will your cat be alone (i.e. a.m./p.m.)?: \_\_\_\_\_ For How Long: \_\_\_\_\_
22. Have you ever had a cat that:  
 Did Not Use the Litter Box       Was Shy/Hid A Lot       Played Rough       Was Destructive  
 Nipped When Petted       Was Aggressive Towards People  
 How did you handle it? \_\_\_\_\_  
 \_\_\_\_\_  
 Was it successful?  Yes  No
23. Where will this cat stay?       Indoor/Outdoor       Indoors at First, then Indoor/Outdoor  
     Outdoors Only       Indoors Only
- If outdoors:  
 a. What type of outside shelter will you provide this pet during winter months? \_\_\_\_\_  
 b. What type of outside shelter will you provide this pet during the summer months? \_\_\_\_\_
24. Do you have a veterinarian?  Yes  No  
 Name of Vet: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Auburn Valley Humane Society Feline Adoption Questionnaire – Continued

Please keep in mind that your home will seem foreign to this cat for several weeks. Extra precautions will need to be taken to ensure that this animal does not run away because the animal does not realize it is home. Windows, doors and escape routes must be given extra attention until your new pet adjusts to its new home. Adopter Initials \_\_\_\_\_

### SCHEDULING THE RETURN OF ADOPTED ANIMALS

We understand that not all adoptions are a perfect fit to your family. Before considering returning an animal, which you have adopted from AVHS, within the initial 10 day period, you MUST schedule an appointment by calling 253-249-7849.

Adopter Initials \_\_\_\_\_

*AVHS is not responsible if your new pet runs away and will not refund your money based on this action alone.*

***I CERTIFY THAT THE ABOVE IS TRUE AND THAT ANY FALSE INFORMATION MAY RESULT IN NULIFYING THIS AND/OR FUTURE ADOPTIONS.***

Adopter  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Auburn Valley Humane Society Representative

Name (please print) \_\_\_\_\_ Date: \_\_\_\_\_

Signature \_\_\_\_\_

#### **Our Mission**

*The Auburn Valley Humane Society is dedicated to providing shelter, quality care and love for all the lost, mistreated and abandoned animals in Auburn. AVHS utilizes all available resources to ensure each animal is placed into a loving and forever home and promotes responsible pet ownership through education and outreach.*