

Yellowstone Valley Animal Shelter CAT ADOPTION APPLICATION

Name _____ Date _____ Time _____

Address _____ City _____ State _____ Zip _____

Phone (1) _____ Phone (2) _____ E-Mail _____

Do you currently live in a:

House Apartment Condo Trailer Other _____

Do you currently: Own Rent Lease Rent/Lease Lot/Land

How many adults live in your home? _____ How many children? _____ Age(s) of children? _____

Who will be primarily responsible for the care of this cat? _____

Is this cat a gift? Yes No If yes, for whom? _____

Which of the following best describes your reasons for wanting this cat? (Check all that apply)

Companion For Kids Mouser Companion for pet

Other _____

Will this cat be: Indoor Only Outdoor Only Indoor/Outdoor

Do you plan to have the cat declawed (if it's not already)? Yes No

If yes, please explain why: _____

Describe the personality you are looking for in a cat: _____

Under what circumstances would you NOT keep this cat? _____

List the pets you **currently** have in your home:

Breed or animal type	Age	Sex M/F	Spayed/Neutered	Owned how long?	Does this pet get along with cats?
			YES NO		
			YES NO		
			YES NO		
			YES NO		
			YES NO		
			YES NO		

Signed _____ Date _____