



# Black Cat holistic rescue

## Adoption Application

Cat Preference (names if known) \* \_\_\_\_\_

Your Name \* \_\_\_\_\_

Occupation \* \_\_\_\_\_

Primary Phone \* \_\_\_\_\_

Alternative Phone \_\_\_\_\_

Home address\* \_\_\_\_\_

City \* \_\_\_\_\_ State \* \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \* \_\_\_\_\_

Name of Spouse/Significant Other \_\_\_\_\_

Children (with  
ages) \_\_\_\_\_

Age of primary caretaker(s) \* \_\_\_\_\_

List additional people in household

\* \_\_\_\_\_

Who will be responsible for the cat's care (Feeding, cleaning litter box, taking to  
vet?) \_\_\_\_\_

Has anyone in your household experienced allergies or asthma? \_\_\_\_\_

**Are you prepared to care for this cat for 15-20 years? \_\_\_\_\_**



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## Why are you looking to adopt a cat?

Is your home a

- House
- Apartment
- Studio
- Duplex
- Condo
- Townhouse

How long have you lived at this address?

Do you have plans to move in the near future?

If yes, where to?

Do you rent or own your home?

If renting, do you have permission to have a pet?

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Landlord's Name \_\_\_\_\_

Landlord Phone Number \_\_\_\_\_

Do you have any of the following?

- Patio
- Balcony
- Pet Door
- Unscreened Windows
- Unscreened Doors
- Backyard

In what areas of your home will your cat be allowed? \_\_\_\_\_

Where will you keep the litter box?

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How many hours of the day will your cat be left alone? \_\_\_\_\_

Where will (s)he be left when alone? \_\_\_\_\_

Will your new cat be an indoor or outdoor pet?

- Indoors
- Outdoors
- Both

If allowed outside

- Anytime
- Daytime only
- Under supervision
- On balcony/patio only
- On a leash

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- Only when cat is older
- Only if I move to a house or other location
- If both, how many hours per day will your new cat be outdoors?

Is this your first pet? \_\_\_\_\_

Do you have any other pets? \_\_\_\_\_

If yes, what kind and how many?

Dogs \_\_\_\_\_

Cats \_\_\_\_\_

Other \_\_\_\_\_

**Please state the types of other pets above.**

Where did you get your current pet(s)? \_\_\_\_\_

What brands of pet food do you feed your pets? \_\_\_\_\_

Please list pets you've previously owned

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What happened to pets previously owned? \_\_\_\_\_

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If deceased, what was the cause of death?

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If you previously owned cats, were any of them declawed? \_\_\_\_\_

If yes, where was the procedure performed?

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Do you plan to declaw your new cat?

- No
- Yes
- Unsure
- Depends on behavior

If yes, why/under what circumstances? \_\_\_\_\_

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Name of Current Veterinarian and/or Clinic

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Vet's phone # \_\_\_\_\_

If you have other dogs or cats, are they spayed/neutered? \_\_\_\_\_

If you have cats, are their vaccinations current? \_\_\_\_\_

Have they been tested for leukemia (FeLV) and FIV? \_\_\_\_\_

What is your limit on vet expenses? \_\_\_\_\_

What is a behavior that would not be acceptable to you?

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Were you ever in a situation where you were not able to keep a pet? \_\_\_\_\_

If yes, Please Explain

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I certify that all of the above information is true and accurate. I understand that if I adopt a pet from Black Cat Holistic Rescue, this document will become part of the adoption record.

Full Legal Name \* (please print) \_\_\_\_\_

Signature\* \_\_\_\_\_

Today's Date \* \_\_\_\_\_