

**EAST GREENWICH ANIMAL PROTECTION LEAGUE, INC.  
CAT ADOPTION APPLICATION**

**ADOPTION FEE: CASH ONLY!**    *Adult Cat (1 year or older): \$100    Kitten (under 1 year): \$140*

Date: \_\_\_\_\_

Name of Animal Interested In: \_\_\_\_\_

**1. General Information**

Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
Address: \_\_\_\_\_ Home #: \_\_\_\_\_  
City: \_\_\_\_\_ Cell#: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Driver's License #: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Occupation & Employer's Name: \_\_\_\_\_

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

**2. How did you hear about us? (Circle the main source)**

Adopt-A-Pet                      EGAPL website                      Facebook                      Petfinder                      Twitter  
Newspaper, magazine, or other website (please specify): \_\_\_\_\_  
Youtube      Flyer              Open House Sign      Word of mouth      Other: \_\_\_\_\_

**3. Why are you currently looking to adopt a cat/kitten? (Please circle)**

Replace previous pet    Companion for me    Companion for another pet    Gift for child    Gift for someone else  
Other: \_\_\_\_\_

**4. Do you currently have any other animals:    \_\_\_ Yes                      \_\_\_ No**

If yes, please provide the following information:

**Number of CATS/KITTENS in home:**                      Age(s):

Name(s):

A. Are any cats declawed?                      \_\_\_ Yes                      \_\_\_ No

B. Are the cats indoor, outdoor, or both? \_\_\_\_\_

C. Are all the cats spayed or neutered?                      \_\_\_ Yes                      \_\_\_ No

D. Have they been tested for FIV (Feline AIDS)

    and Feline Leukemia?                      \_\_\_ Yes                      \_\_\_ No

    If yes, do any cats have these diseases?                      \_\_\_ Yes                      \_\_\_ No

E. Are rabies & distemper shots up to date?                      \_\_\_ Yes                      \_\_\_ No

**Number of DOGS/PUPPIES in home:**                      Age(s):

Name(s):                      Breed(s):

Are the dogs current on all vaccines?                      \_\_\_ Yes                      \_\_\_ No

Are the dogs on heartworm medication?                      \_\_\_ Yes                      \_\_\_ No

Are the dogs spayed or neutered?                      \_\_\_ Yes                      \_\_\_ No

**Number of OTHER ANIMALS in home:**                      Species:

5. Do we have permission to contact your vet regarding past or present pets?  Yes  No

Name of Vet: \_\_\_\_\_

Phone Number: \_\_\_\_\_

6. Do you or does anyone living in your household have any known allergies to animals?  Yes  No

7. Have you ever had pets prior to your current pet(s)?  Yes  No

If yes, what type of pet?  Cat  Dog  Bird  Other: \_\_\_\_\_

How long did your pet(s) live with you? \_\_\_\_\_ What happened to him/her? \_\_\_\_\_

8. What is your housing situation?  House  Condo/Apt  Mobile Home  Dorm  Townhouse

Do you:  Own  Rent  Live With Parents  Live With Others

Are you currently a student? \_\_\_\_\_ If so, where? \_\_\_\_\_

If renting, name and phone number of Landlord: \_\_\_\_\_

9. Would you have your adopted cat/kitten declawed (surgery to remove claws)?  Yes  No  Not sure

If yes or not sure, circle the following circumstances under which you would need to declaw the cat:

Scratches me      Scratches child      Scratches my other pet      Scratches furniture

Will be indoors so won't need claws      Better to declaw than risk having cat scratch people/furniture

Other: \_\_\_\_\_

10. Where will your cat (and any existing cats) spend their days and nights? Select all that apply:

Indoors Only  Outdoors Only  Indoors At Night  Outdoors During Day  Screened Porch

4-Season Porch  Basement  Single Room  Crated  Garage  Barn

Other (Please Explain) \_\_\_\_\_

11. It can cost up to \$500 a year to keep a cat or kitten. Are you able to pay for this? \_\_\_\_\_

12. What would you do under the following circumstances:

a) Cat scratches furniture or wood \_\_\_\_\_

b) Cat urinates or defecates outside of litterbox \_\_\_\_\_

c) Cat scratches/nips you or a family member \_\_\_\_\_

d) Cat jumps on countertop \_\_\_\_\_

e) Cat goes outside \_\_\_\_\_

13. Have you ever adopted from EGAPL or a different rescue group or shelter before?  Yes  No

If yes, where and when: \_\_\_\_\_

Do you still have the animal?  Yes  No If no, what happened? \_\_\_\_\_

14. Have you ever had a cat/kitten go missing (ran away, hit by car, attacked by another animal, etc.)?

If yes, please explain: \_\_\_\_\_

15. Have you ever surrendered an animal to a shelter or rescue group? \_\_\_ Yes \_\_\_ No

If yes, please explain: \_\_\_\_\_

16. Have you ever had to surrender a pet to a friend or family member? \_\_\_ Yes \_\_\_ No

If yes, please explain reason: \_\_\_\_\_

17. Who lives with you and what are their ages:

Names:

Ages:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE READ CAREFULLY**

This application is designed to help us determine if an adoption is in the animal's best interest and to assist the potential adopter in finding an animal most compatible with his/her lifestyle. An unsuitable adoption can result in an unpleasant experience for adoptive families and may ruin the pet's chances for any future adoptions.

*WE HOPE YOU WILL AGREE THAT THE ANIMAL'S WELFARE MUST BE OUR FOREMOST  
CONSIDERATION.*

I understand the above questions and have answered this application truthfully. I understand that misrepresentation or omission of facts is cause for denial of adoption.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**BELOW IS TO BE ANSWERED BY LEAGUE OFFICER:**

Approved By: \_\_\_\_\_

\_\_\_\_\_

Proof of Homeownership/Copy of Lease \_\_\_\_\_

Veterinary Records \_\_\_\_\_

Cat Carrier \_\_\_\_\_

Adoption Fee in Cash \_\_\_\_\_