



Last Name: _____
Date: _____ Time: _____

Revised 12/2016

Cat Application

ID #	Name	Species/Breed	Gender	Approx. Age
A-				
A-				

Applicant _____ Co-applicant _____
Address _____ City _____ State _____ Zip _____
Primary Phone # _____ Secondary Phone # _____
Email _____ Check this box if you choose NOT to receive AWLA email ☐

Housing: ☐ Own ☐ Rent ☐ House ☐ Town House ☐ Condo ☐ Apartment

Pet History (up to 3)	Type	Breed	Age	Gender	Length owned
<input type="checkbox"/> Previous <input type="checkbox"/> Current					
<input type="checkbox"/> Previous <input type="checkbox"/> Current					
<input type="checkbox"/> Previous <input type="checkbox"/> Current					

Where do you plan to keep your cat? ☐ Indoors ☐ Outdoors ☐ Indoor/Outdoor

Do you plan on declawing your cat? ☐ Yes ☐ No ☐ Maybe

Which behaviors would you like additional information on? (check all that apply)

☐ Maintaining good litterbox habits ☐ Introducing to current pets ☐ Diet ☐ Play and Enrichment
☐ Redirecting destructive behaviors ☐ Aggression ☐ Living with children ☐ Other _____

Our adoption contract states that you will take this cat to a vet within 10 days. The initial exam fee will be waived if you visit one of our participating vets. You will be responsible for any medications or treatments the cat requires. You are also required to keep this cat up to date with rabies vaccinations and medical care as needed. Do you understand and agree to this?

☐ Yes ☐ No **Please initial** _____

Have you, or has anyone who lives with you, ever been convicted of animal cruelty, neglect or abandonment?

☐ Yes ☐ No **Please initial** _____

I certify that all the information in my application is complete and accurate. I understand that false or incomplete information may result in the denial of my application. The League reserves the right to request additional materials prior to approving this application including but not limited to vet reference, verification of ownership of residence, proof of financial ability to provide for a pet, etc. We may also contact other shelters/jurisdictions regarding history of pet ownership and/or complaints received.

Signature _____ Date _____
Signature, co-applicant _____ Date _____
Signature, staff/volunteer _____ Date _____

***The League may deny any adoption application it deems not in the best interest of the animal.**