



14600 COLONEL GLENN ROAD
 LITTLE ROCK, AR 72210
 501-227-6166

CAT ADOPTION REQUEST FORM

CATS ARE TO BE ADOPTED TO INSIDE HOMES ONLY!

The Humane Society of Pulaski County (HSPC) strives to assure that the homes in which our cats are placed meet the highest standards of animal care. **We reserve the right to deny any adoption request.**

Please Print Clearly and Answer All Questions!		Staff Use Only:
Current Date:		Employee:
Name:	DOB:	
Address:		Cat:
City:	State: Zip:	Kitten:
Home Phone:	Cell Phone:	Control #:
Work Phone:		
Email Address:		Check #:
Employer:	How Long?	Credit:
Previous Employer:	How Long?	Cash:

1. What is the name of the cat you wish to adopt? _____
2. Where did you first see this cat? HSPC Warmhearts.org PetFinder.com Other: _____
3. Why do you want to adopt a cat? _____
4. Is this cat to be a gift for someone? Yes No
5. Have you ever adopted a pet from HSPC? Yes No. If so, when? _____
6. Have you ever had to give up/surrender ownership of a pet? Yes No. If yes, why? _____
7. Would you object to a home visit before adopting? Yes No If yes, why? _____
8. We reserve the right for an authorized representative to make random and unannounced visits to assure adoptions are going well. Is that acceptable to you? Yes No

ANIMAL INFORMATION:

9. Have you had any other animals in the past ten years? Yes No If so, what happened to them? _____
10. If any of your pets are deceased in the past ten years, please indicate the cause(s) of death: _____
11. Please list animals currently in household: _____

Type of Animal (Dog, cat, fish, etc.)	Age	Sex	Spayed/ Neutered	Vaccinations Current	Indoor	Declawed	Temperament
		F/M	Yes / No	Yes / No	Yes / No	Yes / No	
		F/M	Yes / No	Yes / No	Yes / No	Yes / No	
		F/M	Yes / No	Yes / No	Yes / No	Yes / No	
		F/M	Yes / No	Yes / No	Yes / No	Yes / No	
		F/M	Yes / No	Yes / No	Yes / No	Yes / No	

12. Would you adopt an animal that has health problems? Yes No
13. Name of your Veterinarian: _____
14. Name of your Veterinary Clinic: _____
15. Generally, non-emergency medical care runs around \$150-\$250 for a healthy cat per year. Emergency medical care can be more costly. This cost does not include food, litter, toys, grooming, etc. Are you willing to commit these resources for the annual and emergency medical care for this animal? Yes No
16. Do you agree to take the cat you are adopting to a licensed veterinarian within seven (7) working days of the adoption for a general check-up as required? Yes No
17. Will you assure that this cat receives required yearly vaccinations, including rabies? Yes No
18. Are you prepared to deal patiently with problems like clawing furniture or soiling the carpet? Yes No Do you want a cat badly enough to put up with these behaviors until a solution can be found? Yes No
19. If you must give up your animal, how would you proceed? _____

HOUSEHOLD INFORMATION:

20. Do you live in a house, apartment, condo, or mobile home?
21. Do you own or rent your home? How long have you lived at this address? _____
22. Do you live with a relative? Yes No
23. If renting, does your landlord allow pets? Yes No. What is the size limit? _____. Does the landlord require a pet deposit? Yes No. Has the deposit already been paid? Yes No. What is the name and telephone number of your landlord?

24. Are you planning to move soon? Yes No
25. Do you have a room in which you keep a new pet separated from your other animals? Yes No
26. Approximate square footage of home? _____
27. How many hours will this cat be without human companionship per day? _____
28. Will your cat be indoors outdoors indoors/outdoors?
29. Are you planning to have the cat declawed? Yes No
30. Do you have food and water bowls, litter, and a litter box? Yes No

FAMILY INFORMATION:

31. Number of adults in household: _____. Number home during the day: _____.
32. Number of children in household: _____. Ages of children: _____
33. Who will be primarily responsible for the care of a new pet? _____
34. Is anyone in your household allergic to animals? Yes No. If yes, please explain: _____
35. How frequently do you make business/vacation trips? _____. What provisions will you make for your animal at these times? _____
36. How much time can you spend playing with/tending your new pet in the next few weeks, e.g., petting, brushing, 5 or more hours a day, 3-4 hours a day, 1-2 hours a day, less than 1 hour a day, 2-3 hours a week, less than 2 hours a week.
37. Has everyone in the family agreed to adopt an animal? Yes No

ADOPTION IS A LIFE-LONG COMMITMENT

38. Adopting a companion animal is a great responsibility. You will be sharing your life with a pet (for up to 15 to 20 years) who is totally dependent upon you for food, shelter, clean up, veterinary care, and lot's of love. Are you willing and able to make this life-long commitment to an animal? Yes No

39. Except for medical reasons and extraordinary circumstances, we do not provide refunds for your adoption fee. Are you willing to make the commitment to seek advice or training to resolve any behavioral or medical concerns with your animal? Yes No
40. Are you willing to make arrangements that will allow you to take your animal with you should you move? Yes No
41. You are responsible for checking to see if the city in which you live requires animals to have a city license. Will you assure that license requirements are followed? Yes No
42. Will you keep the HSPC ID tag for immediate identification if your pet is lost or injured? Yes No

ADOPTION IS A LIFE-LONG COMMITMENT

I UNDERSTAND THE FOLLOWING:

- Except for medical reasons and extraordinary circumstances, HSPC does not provide refunds for adoption fees. **Please initial:** _____
- I understand the need to keep my cat current on annual vaccinations. **Please initial:** _____
- I understand that the HSPC cannot guarantee the health, temperament, or training of the animal and I hereby release the HSPC from all liability once the animal is adopted. **Please initial:** _____
- I further understand that the HSPC does not adopt cats to be outside pets. Cats adopted from the HSPC upon a home check found outside the home will be reclaimed at that time and returned to the HSPC. **Please initial:** _____
- Animals should be closely supervised when they are with children. **Please initial:** _____

The information provided in the adoption request questionnaire is true and correct, and I understand that providing false information is sufficient reason for the Humane Society of Pulaski County to deny this adoption or to reclaim the animal or animals.

Adopter: _____

HSPC Employee: _____