



3934 North Hayston Avenue • Fresno CA • 93726 • (559) 233-8554
E-mail: cats@valleyanimal.org

PRE-CAT ADOPTION APPLICATION

Cat: _____

Date: _____

Adopter Name: _____

Co-Adopter Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Home Phone: _____

Email: _____ (required)

How long have you been at this address? _____ Rent Own

Name of Landlord/Manager: _____

Landlord Address: _____ Phone: _____

Will you keep the cat: Inside Outside Both

If you move, will you take the cat with you? Yes No

Adopter Employer: _____

Other source of income: AFDC Alimony/Child Support Disability/Pension Unemployment
 Other If other, please explain: _____

Co-Adopter Employer: _____

Other source of income: AFDC Alimony/Child Support Disability/Pension Unemployment
 Other If other, please explain: _____

Is this pet for you? Yes No If no, for whom? _____

Have you ever had a pet? Yes No If yes, what kind? _____

Do you still have the pets? Yes No If no, why? _____

Are your pets spayed or neutered? Yes No If no, why? _____

Do you have any known allergies to cats? Yes No Do you suffer from asthma? Yes No

If yes, explain: _____ If yes, explain: _____

Are you a frequent traveler? Yes No If yes, how often? _____

Do you have children? Yes No If yes, their ages? _____

Animals often playfully scratch or bite (especially kittens). If you or a child does receive a scratch or bite, will this be a reason for you to return the animal to the shelter? Yes No

Would normal wear and tear on household items be a reason to return this animal to the shelter? Yes No

Have you ever had a pet declawed? Yes No

Are you interested in having this animal declawed? Yes No

Veterinarian: _____ Phone: _____

Are you financially able and willing to give the cat any medical care it may need? Yes No

The life span of a cat may be up to 20 years. Are you prepared to care for this cat for its natural life? Yes No

Do you have someone who will care for the cat if you are unable to for any reason? Yes No

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

The Adopter hereby understands and agrees that any and all fees charged for the adoption of this animal are **NON-REFUNDABLE**. The Adopter also understands and agrees that if any animal adopted from the Valley Animal Center is not compatible in their household or does not work out for any reason, the animal may be returned within 30 days of the date of this contract. If the Adopter found that this animal was incompatible, but would like to exchange it for another animal, the animal may be exchanged within 30 days of the contract, pending approval. The Adopter understands that they are only allowed to make a one-time exchange. _____ (Please initial)

After the 30 day period has expired, the Adopter may return the animal to the Valley Animal Center only upon approval from the Shelter Manager and with the requirement of a surrender fee, to be determined by the Shelter Manager. _____ (Please initial)

Applicant Signature

Co-Applicant Signature

How did you hear about us?

VAC Website

Facebook

Twitter

Friend

Vet office

Other, please specify: _____

Adoption Counselor: _____
Name

Application Approved: _____
Initials Date

Application Rejected: _____
Initials Date

Manager Review: _____
Initials Date