



Cat Name: _____
ID #: _____
Chip: # _____
Date/Time: _____
Counseling done: Yes No
Representative: _____
Notes: _____

Cat Adoption Application

To adopt a pet you:

- o Need to present current identification showing present address.
- o Must be at least 18 years of age.

Personal Information

Name: _____

Address: _____

City _____ State _____ Zip _____

Phone: _____ Work: _____

E-mail address: _____

Secondary contact: _____ Phone: _____

Why would you like to adopt a cat? _____

Does anyone in your home have cat allergies? Yes No

Are you prepared to provide this cat with the necessary veterinary care? Yes No

Veterinarian's name and phone number: _____

Housing Information

Apartment House Mobile Home Other _____

Rent* Own

*Landlord's name and phone number: _____

Do any children reside in your home? Yes No

If yes, please list their ages: _____

Pet Information

Please list all current pets in your home.

Name	Species	Age	Indoor/Outdoor?	Time in your care	Spayed/Neutered
_____	_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>

Please list any known causes of death for past pets: _____

Do you plan to have your adopted cat declawed? Yes* No

*Why? _____

Adoption Promotion

How did you hear about pet adoptions from No Kill Glynn County? (check all that apply)

Newspaper Article
 Newspaper Ad
 Magazine
 Radio
 TV
 Off-Site Adoption
 Friend
 Social Media
 Website
 Other

Additional details: _____

Did a special promotion make a difference in your decision to adopt? Yes No

Agreement

By signing this form, I acknowledge that all information on this form is true and correct. I understand that any misrepresentation of fact may result in NKGCC refusing adoption privileges to me. I authorize NKGCC to contact all veterinarians listed on the application and the landlord if applicable. If my request for adoption is approved and later NKGCC discovers the above information is not true or correct, NKGCC reserves the right to remove the adopted cat from my home.

I would like to make an additional donation of \$_____ to go toward the care of other adoptable animals of No Kill Glynn County.

Signature: _____ Date: _____