NKGC
NO KILL GLYNN COUNTY

Cat's Name:_____
ID: #_____
Date:_____
Counseling done: Yes No
Representative:_____
Notes: _____
_____
_____
_____
_____
AME ☐

Cat Adoption Application

To adopt a pet you:

- *Need to present current identification showing present address.*
- *Must be at least 21 years of age.*
- *Must agree to allow us to photograph and publish on social media.*

Personal Information

Name: _____ DL: # _____

Address:_____

City: _____ State:_____ Zip: _____

Phone: _____ Work: _____

E-mail address: _____

Personal Reference: _____ Phone: _____

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: _____
(**Do not leave blank. Please locate a veterinarian you plan to use if you do not already have one.)**

Housing Information

☐ Apartment ☐ House ☐ Mobile Home ☐ Other _____

☐ Rent* ☐ Own

*Landlord's name and phone number: _____
Written landlord approval, proof of home ownership and/or a home visit may be required.

Do any children reside in your home? ☐ Yes ☐ No

If yes, please list their names & ages: _____

We advise that all our adopted cats and kittens be indoor only. Indoor cats live longer and healthier, avoiding the dangers of disease and predators outdoors. At times, we will have cats that may be available for adoption as indoor/outdoor cats, based on their history and behavior.

Pet Information

Please list the current pets in your home.

Name Species Age Indoor/Outdoor Time in your care Spayed/Neutered

_____ Yes ☐ No ☐

_____ Yes ☐ No ☐

_____ Yes ☐ No ☐

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

***NKGC does not adopt kittens or cats to anyone planning to declaw because declawing may render the cat defenseless, inflict unnecessary pain, and adversely affect behavior.**

I hereby acknowledge receiving from No Kill Glynn County, Inc (NKGC):

Name of Animal at Adoption: _____

Microchip # (if applicable): _____

which I agree to care for humanely and maintain in accordance with all laws and ordinances in force in the community in which I reside.

I agree that I will not sell, trade, give away or dispose of such animal in any way, but will contact No Kill Glynn County, Inc., if at any time I desire to relinquish custody. NKGC agrees to accept custody if space is available. If the animal is four months old or more, the owner must provide proof of current rabies for NKGC to accept custody.

No Kill Glynn County will not be responsible for any accidents, injuries, or illnesses of any animal adopted. Any individual adopting from NKGC assumes full financial responsibility and releases No Kill Glynn County, Inc. from the same. **Adoption fees are nonrefundable.**

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 NKGC refusing adoption privileges to me. I authorize NKGC to contact all personal references, veterinarians listed on the application and my landlord if applicable. If my request for adoption is approved and later NKGC discovers the above information is not true or correct, NKGC reserves the right to remove the adopted cat from my home. **I understand that once adopted, any additional vaccinations, medical, flea control, deworming, and otherwise are my responsibility.**

I HAVE READ AND UNDERSTAND THE ABOVE AND AGREE TO ABIDE BY ITS CONTENT.

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

Signature:_____Date: _____