



CAT APPLICATION

220 Beck Road
Indiana PA 15701
724.349.1144
724.349.0923 fax
www.fourfootedfriends.org

DATE _____

CAT'S NAME _____

CRITERIA FOR ADOPTION

ADOPTER'S MUST:

1. Be 21 years of age or older and have a valid photo ID showing their present address.
2. Have the consent of all the adults living in the household.
3. List any and all pets living in the household. THIS INCLUDES PETS OWNED IN THE PAST.
4. If you are a renter, you must have the written AND verbal consent of the landlord. Provide a copy of lease agreement or written permission from landlord with signature, address, and phone number(s) so they can be contacted.
5. Understand that animals are to be kept as an indoor, household companion and integrated into the family.
6. Be physically, emotionally, and financially able to care for the animal selected and take responsibility for all animal care and veterinarian bills.
7. Have at least two personal, non-related references.
8. Provide current vet reference (to include all pets now owned up to date on all vaccines AND past pets having a positive pet care history).
9. Understand and agree that the animal will be spayed or neutered.
10. Understand that Four Footed Friends does not guarantee the health or temperament of any adopted animal.
11. Understand that they are making a commitment for the lifetime of the animal.

I have read and understand the criteria for adoption:

Applicant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____ Phone: _____

EMAIL ADDRESS _____ CELL # _____

Applicant Signature: _____

Applications are taken on a first-come first-serve basis. We do not hold animals. FFF has the right to deny any application for any reason. If your application is denied, FFF would go on to the next application.

"Every animal has the right to live without abuse and die without inflicted pain."



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ADOPTION APPLICATION

Personal Information *(Please Print Clearly)*

Name: _____

Address: _____

City _____ State _____ Zip _____

Borough/Township: _____ County _____

Home Phone #: _____ Work Phone #: _____

Cell Phone #: _____ Email: _____

Time at Current Address: _____

Type of housing: _____ If other, please specify: _____

Do you: Own Rent

Do you plan to move in the future? () Yes () No

When: _____ Where: _____

If you rent:

Landlord's Name: _____

Landlord's Phone #: _____

How did you hear about us? _____

Please list below the people who live in your house, starting with yourself:

Name	Occupation	Age	Primary Caretaker(s)?	Approves of and is willing to help with pet?	Pet allergies?
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		

Basic Adoption Information

Are you interested in a specific cat? If so, who? _____

What attracted you to this pet? _____

What is your primary reason for adoption? _____

When you're not home, where will the pet be kept? _____

What will you do with this pet when you go on vacation? _____

Have you ever given up an animal? **Yes** **No: Explain:**

What will you do with this pet if you move? _____

For what reasons would you rehome a pet? _____

Please provide the following references for us:

	How you know them, and for how long	Phone #s and best time to reach them	FFF Use: Notes
Non-related Reference 1			
Non-related Reference 2			
Most recent Veterinarian			
Vet you plan to use for this pet			

Pet History Information

1. Do you have pets now? **Yes** **No**

2. Have you had pets in the past? **Yes** **No**

Answer the following for your past AND current pets:

3. Are your pets (up to date on vaccinations (if applicable)? **Yes** **No**

4. Have your pets been HW/FelV/FIV tested if applicable AND are negative? **Yes** **No**

5. Are your pets on monthly flea/heartworm preventatives? **Yes** **No**

6. Are your pets spayed/neutered? **Yes** **No**

7. How often do your pets see a vet for testing/exams? _____

If you answered "NO" to any of questions 3-6, please explain:

Species/ Breed	Age	Sex	Name	How long kept	Where did you get this pet and why?	Owner's name on Veterinarian records	If no longer with you, what happened to this pet?

**Please complete the chart below with the required information about your pets (past AND current):
If you have any other pets that do not fit on the form, please provide the information asked for above in an email, or type below:**

I certify that all information supplied on this application is true and correct. I understand that Four Footed Friends reserves the right to refuse adoption to anyone without giving a reason. I am at least 21 years of age. I hereby give permission to contact any of the referenced names on this application.

Please sign below (type your name and initials if submitting via email)



Signature: _____

Date: _____

Approved: _____ Deny: _____ Reason: _____ Date: _____

[Click here to be directed to the application upload page](#)