

BAY COUNTY ANIMAL SERVICES & ADOPTION CENTER

CAT ADOPTION APPLICATION

Applicant Information

Full Name: _____ Date: _____
Last First AGE

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Animal applying for: _____

Have you had cats before? YES NO

Briefly tell us why you are interested in this cat?

If it is a kitten do you understand that kittens take a lot more care than an adult cat? YES NO

If there are other cats in your home you understand that there may be an adjustment period that can take longer than 2 weeks? YES NO

What are your places for this cat? House Pet Barn Cat ESA Other

If you have a dog do you understand that the cat(s) & dog(s) may take some time to adjust to each other so you will supervise the time the cat(s) is with the dog(s) you will not leave the cat(s) alone with the dog(s)?

YES NO

INFORMATION ON CURRENT PETS

CURRENT PETS:

NAME:	BREED:	AGE:	STERILIZED?
NAME:	BREED:	AGE:	STERILIZED?
NAME:	BREED:	AGE:	STERILIZED?
NAME:	BREED:	AGE:	STERILIZED?
NAME:	BREED:	AGE:	STERILIZED?

Please list any pets you have in the past 5 years that have passed away or you gave away. If you gave the pet away please states as to why

VETERINARIAN REFERENCE

VETERINARIAN:

PHONE:

If the Veterinarian records could be under another name please provide that name below:

HOUSING INFORMATION

Do you live in: House Apartment Mobile Home Other

Do you: Own Rent Live With Parents/Family Member Other

If you rent you will need to provide your landlord's name & phone number this includes Trailer Parks & Apartment Complexes

Landlord's or Property Manager's Name:

Phone#

How many live in the home? Adults:

Children:

Ages of the Children:

Are there any family members who need special consideration for any reason?

If so can you please explain: