



The Advocate for Animals
SINCE 1867

WORKING CAT ADOPTION APPLICATION

Personal Data (Please Print)

Today's Date: _____

Name: _____

Address: _____

Apt.: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: _____

Email: _____

Driver's License ID #: _____

Household Information

Living Accommodations: House Mobile Home Apt Rent Own Other (explain)

Landlord/Apt Manager Name & Phone Number: _____

If applicable, does your lease allow pets? Yes No Unsure

Do you live here full-time? Yes No

What is the size and description of your property? _____

Describe the structure in which the cats will have access to at all times: _____

Animal Information

Why do you want working cats? _____

Do you have a preference on feral, semi-social or social cats? Please explain what you are looking for? _____

Working cats must be securely confined in the barn or other structure for 2 – 4 weeks. Are you prepared to allow this much time? Yes No How will you keep them confined in this space? _____

Are you willing and able to provide fresh food and water daily? Yes No

Do you agree to trap and take to the vet if they becomes ill or injured? Yes No

Have you had working cats before? Yes No

What happened to the pets you no longer have? _____

Do you have your own pets at this time? Yes No

If you have a dog, is he permitted to run loose? Yes No

If yes, what provision will protect the cats? _____

If you have pets of your own, please complete the chart below:

Pet's Name	Breed	Age/Sex	Spayed/Neutered	Indoor/Outdoor	Years Owned

Signature

Date