

Toronto Cat Rescue

ADOPTION APPLICATION



Name		Home phone		Cell phone	
Address		Email			
		City		Postal Code	
Do you ? (circle one)		Own	Rent	Live with relatives	Other
If you rent are cats permitted?		Who are you adopting this cat for?			
How many children are in the home?	Ages?	Does any member of the household suffer from allergies to cats?	Have all household members agreed to adopt a cat(s)?	What will you do with the cat while on vacation?	
Will the cat be kept (circle one): Indoors Outdoors Both		How will you handle potential destructive clawing behaviour?			

Please list the pets you currently own.

Type of animal	Sex	Spayed or neutered	Age	Kept indoors or outdoors	Current on yearly vaccinations
	M F	Yes No		In Out Both	Yes No
	M F	Yes No		In Out Both	Yes No
	M F	Yes No		In Out Both	Yes No
	M F	Yes No		In Out Both	Yes No
Name of veterinarian or vet clinic:					
Are you prepared to handle the financial responsibility of a pet, including supplies, annual vet visits and potential medical emergencies?					

Please list the types and breeds of pets you have owned in the last ten years.

Type of animal	Age?	How long owned for?	What happened to him/her?

I certify that the above information is true. I also understand that giving false information on this application is grounds for denying my application. This application remains the property of the Toronto Cat Rescue.

Applicant's Signature _____ Date: _____