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|  | **Cat Adoption Questionnaire****Please Print Clearly** |
| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt. # \_\_\_\_\_\_\_\_\_\_City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  **FOR OFFICE USE:****P#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****A#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Adoption Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****ACT Initials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **ABOUT YOU AND YOUR HOME** |  | **PET CARE** |
|  |  |
| 1. Please select your age category:
* Under 18
* 18 – 64
* 65+
1. What best describes your living environment?
* House
* Apartment
* Townhome
* Condo

  Do you (circle one): Own Rent1. In your house, number of:

Adults (18+) \_\_\_\_\_Children(under 12) \_\_\_\_\_Children (12-17) \_\_\_\_\_1. What is your residency status?
* Citizen
* Permanent resident
* Student/work visa
1. Have you had cats before?

|  |  |
| --- | --- |
| * Yes
 | * No
 |

1. Were you the primary caregiver?

|  |  |
| --- | --- |
| * Yes
 | * No
 |

1. Is anyone in your home allergic to cats?

|  |  |
| --- | --- |
| * Yes
 | * No
 |

1. The cat will be kept:

|  |  |
| --- | --- |
| * Indoors
* Outdoors
 | * Balcony
* Other: \_\_\_\_\_\_\_\_
 |

 | 9. Please list any other pets you have in your home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_10. What sort of enrichment do you plan to offer your cat?* Toys
* Interactive play time
* Other animals
* Brushing/petting
* Scratching Post

11. What methods would you use to train your new cat?* Spray bottle
* Positive reinforcement
* Tap on the nose
* Clicker training
* “No!” and point
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

12. How often should your cat see a veterinarian?* When sick
* Twice per year
* Annually
* Once every 3 years
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

13. What do you plan to feed your cat?

|  |  |
| --- | --- |
| * Dry kibble
* Wet/canned
* Raw
 | * Tuna
* Vet recommended
* Other: \_\_\_\_\_\_\_\_\_\_
 |

 |
| **IT IS VERY IMPORTANT FOR MY CAT TO….. (please check all the apply)** |
| * Be friendly with children
* Be friendly with other cats
* Be friendly with dogs
 | * Be friendly with strangers
* Enjoy being held
* Be calm
 | * Be playful
* Be quiet
* Be independent
 |

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| **WHAT INFORMATIONAL HANDOUTS WOULD YOU LIKE TO TAKE HOME WITH YOUR NEW CAT?** |
| * Children and cats
* Declawing
* Dog and cat introductions
* Feline enrichment
* Feline scratching behaviour
* Ideal adopter preparation checklist
* Introducing your cat to your home
 | * Indoor cat facts
* Introducing your cat to your baby
* Learning appropriate play behaviour
* Litter box issues
* Play aggression
* Some signs you may have a sick cat
* Cat to cat introductions
 |

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| https://www.hillspet.ca/content/dam/cp-sites/hills/hills-pet/en_us/shelter/FSL-Bowl-Final-RGB_071816_thumbnail.png | We offer all new pet parents the opportunity to participate in the Hill’s New Pet Parent program. As part of the Hill’s New Pet Parent program, you will receive a link to Hill’s New Pet Parent website, and more information about the Hill’s food, the Adoption Kit and other tips for new pet parents as well as coupon offers. * Yes, I would like to receive email, other electronic communication, and/or mail with information and special offers from Hill’s Pet Nutrition Canada Inc. and its family of brands about my adoption. (**You can unsubscribe at any time**). Hill’s Pet Nutrition Canada Inc. – P.O. Box 699, Streetsville, Ontario L5M 2C2 – HillsPet.ca
 |
|  | Microchip registration is provided through 24PetWatch. Your email address is provided to them so that you can confirm registration, manage your account online, and receive a special offer on Pet Insurance. |

I, the undersigned, agree and understand that this pet is a stray with no known history. While appearing healthy, this pet could have an underlying health problem which may not be reasonably detectable at the time of adoption. I understand that any health concerns should be brought to the attention of London Animal Care Centre within **7 days** from adoption.

I understand that any veterinary care for the adopted pet is at my discretion, however London Animal Care Centre highly recommends having the animal examined by my veterinarian within **72 hrs** of adoption. I understand that London Animal Care Centre will not reimburse me for any medical expenses incurred after an animal has been adopted.

I understand that I may return the animal to London Animal Care Centre for a full refund within **2 weeks** if the pet should prove unsuitable in its new home. I do understand that some animals take longer than others to settle into a home, and agree to contact London Animal Care Centre for guidance prior to returning the animal.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Signature Date

I give LACC permission to take my photo and understand that it may be used on social media to promote adoptions.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_