



**Name of Cat/kitten:**

Please answer all questions fully to help avoid delays in processing your adoption. Form.

Name \_\_\_\_\_ Date of Birth (mm/dd/yyyy) \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Work Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_ Occupation/Title \_\_\_\_\_

Do You Own Your Home? \_\_\_\_\_ Is Your Name on the Home's Deed? \_\_\_\_\_

What type of Residence Do You Reside?	<input type="checkbox"/> House	<input type="checkbox"/> Condo/Apartment	<input type="checkbox"/> Mobile Home	<input type="checkbox"/> Student/Military Housing
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How Long Have You Resided at Your Present Address? \_\_\_\_\_ Years \_\_\_\_\_ Months

How Many Times Have You Moved in the Last Five Years? \_\_\_\_\_

List All People Living in Your Home and Ages: \_\_\_\_\_

Are All Members of Your Home Aware of Your Plans to Adopt This Cat? \_\_\_\_\_

Has Anyone in Your Home Been Told They Are Allergic to Animals? \_\_\_\_\_

If You Rent (if not applicable, please skip)	
Landlord's Name and Phone	How Much Is the Pet Deposit? \$
Does Your Apartment/Condo Association Allow Pets?	

CURRENT PET(S) HISTORY						
Pet's Name	Type/Breed	Age	Sex	Altered	Declawed	Time Owned

Do any of your current pets have health or behavioral issues? If so, please list. \_\_\_\_\_

PREVIOUS PETS (any pets you have had in the past 5 years, that no longer reside with you for any reason)							
Pet's Name	Type/Breed	Age	Sex	Altered?	Declawed	Time Owned	Reason You No Longer Own /Date Deceased?

Have you ever surrendered an animal to a shelter in the past? \_\_\_\_\_ Why? \_\_\_\_\_

Please turn over and fill out the form in full

**VETERINARIAN INFORMATION**

Who is your Veterinarian? \_\_\_\_\_ Veterinarian's Phone \_\_\_\_\_

How long have you been a client? \_\_\_\_\_

If at your current Veterinarian for less than five years, who was your previous Veterinarian? \_\_\_\_\_

Has your cat(s) been tested for Feline Leukemia/Aids virus?  Yes  No When? \_\_\_\_\_ Result? \_\_\_\_\_

Do you plan on declawing this cat? \_\_\_\_\_

Do you plan to keep this cat/kitten indoors? \_\_\_\_\_

Are you willing and able to pay an average of \$150 per year in basic veterinary care? \_\_\_\_\_

Should your cat become injured or ill, how much are you prepared to spend? \_\_\_\_\_

How long will the cat be alone every day? \_\_\_\_\_ Who will care for this cat if/when you go out of town? \_\_\_\_\_

Do you agree to a home visit and understand that it might be required prior to adoption? \_\_\_\_\_

**Please read and agree by checking the following carefully:**

- \_\_\_\_\_ I/we will return the cat(s) to One By One if unable to keep the cat(s), *regardless of reason*
- \_\_\_\_\_ I/we will advise One By One of any address or phone number changes during the life of the cat(s)
- \_\_\_\_\_ I/we will not declaw this cat/kitten and will promise to keep this cat/kitten as an indoor only companion pet
- \_\_\_\_\_ I will notify One By One if the cat/cats becomes seriously ill or a decision is made to euthanize

**Please list the name & phone number of a person who will always be in contact with you (besides yourself).**

Name	Relationship to You	Phone Number
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I am donating an adoption fee to ONE BY ONE to help defray partial costs involved in the vetting of this cat/kitten. Please be aware, all unaltered kittens MUST be altered by 6 months of age. We will do a follow up vet check to ensure this was done.

I/we the undersigned adopting party, realize that **One By One** can make no warranty or representation as to the continued good health and disposition of this animal and, from this date forward, I/we assume all expenses in connection with the maintenance and health of this animal, all future veterinary bills are solely the responsibility of the pet owner. Further, I/we understand that **One By One** will have the right to ascertain that the conditions of this agreement are being complied with on a continuing basis. We may do this through home visits (we will call first for a convenient time) and by phone calls to verify vet check ups for ongoing care of this cat. If I/we violate any of the above terms, **One By One** will have the right to immediately reclaim the animal.

I understand the spirit of this contract is for the protection of this cat/kitten, and I will take care of it to the best of my ability. I understand and agree to pay any and all expenses, including court costs and reasonable attorney fees, necessary to enforce this contract.

**My signature below shows that I/We are in agreement with the above terms:**

Signature: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ Date: \_\_\_\_\_

**One By One Cat Rescue**  
**P.O. Box 272 Temple, PA 19560**  
[www.1by1catrescue.org](http://www.1by1catrescue.org)  
**484-839-2019**

*Office Use Only:*

Color: _____	Age: _____	Amount: \$ _____	Check # _____ Cash _____
Sex M / F	Breed: _____	Vet Records: Rec'd _____ Send _____ Copy of App Rec'd _____ Send _____	Adoption processed by: _____ Date of Adoption: _____