Approved / Denied
Date: _____
Initials: _____

Peaceable Kingdom, Inc.

1049 MacArthur Road
P.O. Box 424
Whitehall, Pa. 18052
Phone: (610) 432-2532
Email: pkvolunteer@yahoo.com

A 501 (c) (3) Non-Profit/No-Kill/Tax Deductible Organization
www.lvpeaceablekingdom.info

FELINE ADULT CAT ADOPTION APPLICATION

PLEASE PRINT CLEARLY

Applicant's Name(s): _____ Driver's License #: _____
Address: _____ City: _____ State: _____ Zip: _____
Home Phone:_____ Cell:_____ Are you a student? ☐ Yes ☐ No
E-mail: _____ Name of Pet You Want to Adopt: _____
Name of personal reference:_____ Phone:_____
Relationship to you: ☐ Family ☐ Friend ☐ Neighbor ☐ Other _____

HOUSEHOLD SITUATION

What is your living situation? ☐ Own home ☐ Own Condo/townhouse ☐ Parent's home ☐ Rent
How long have you lived at your current residence? _____
If you rent, are pets allowed? ☐ Yes ☐ No Landlord's Name:_____ Phone:_____
(We must verify that your landlord will support your keeping this pet before it can go home with you.)
Describe your household activity: ☐ Quiet ☐ Average ☐ Active ☐ Noisy
Ages of the children living in your household: _____, _____, _____, _____, _____, _____
Is anyone in your household allergic to pets? ☐ Yes ☐ No ☐ I don't know
What will you do if someone in your house develops allergies to this pet? _____
How long have you been thinking of adopting a cat? _____
Are you able to pay for pet expenses including vet care, supplies, toys, food, pet-sitting, etc.? ☐ Yes ☐ No
Does everyone in your home want this cat? ☐ Yes ☐ No
Are you aware that some cats require a period of weeks or even months to adjust to their new home/environment/family/other pets? Are you willing to allow for this adjustment period? ☐ Yes ☐ No, I prefer a pet who will adjust quickly

PET INFORMATION

Will this cat be allowed outdoors? ☐ Yes ☐ No ☐ Undecided
Where will your cat be when you are not home? _____
I would like info on: ☐ Litter training ☐ Scratching Prevention ☐ Feeding ☐ Vaccinations/Vet Care ☐ Introducing a New Pet

Adopting an animal is a lifetime commitment. Are you prepared and financially able to make the commitment to care for and keep this animal for its entire life? ☐ Yes ☐ No

Do you agree to return your pet to Peaceable Kingdom if your conditions change and you are no longer able to care for your cat (*must give two weeks notice*)? ☐ Yes ☐ No

By signing below, I am agreeing that the all information is correct. I understand that if reference and veterinary checks do not correspond with the information I've provided, I will be denied adoption.

Signature: _____ **Date:** _____

Revised April 20, 2013

Veterinarian Name: _____ Phone #: _____

May we have your permission to contact them regarding your application? ☐ Yes (a release may be required) ☐ No

Please list pets that you have now or have had within the past 5 years:

Pet Name	Type (dog, cat)	Age	Sex	Neutered	Kept Where?	Pet's Current Status
			M / F	Yes / No	Indoor / Outdoor	
			M / F	Yes / No	Indoor / Outdoor	
			M / F	Yes / No	Indoor / Outdoor	
			M / F	Yes / No	Indoor / Outdoor	
			M / F	Yes / No	Indoor / Outdoor	
			M / F	Yes / No	Indoor / Outdoor	
			M / F	Yes / No	Indoor / Outdoor	

Are your pets current with vaccinations and vet care? ☐ Yes ☐ No ☐ I don't know *** Proof of current vaccinations is required**

If you have a dog, is your dog friendly around cats? ☐ Yes ☐ No ☐ I don't know

Have you lost a cat in the past year due to a death or another reason? ☐ Yes ☐ No

If yes, please explain: _____

Have you ever had a pet that was lost or hit by a car, surrendered a pet to a shelter or given a pet away? ☐ Yes ☐ No

If yes, please explain: _____