

cat adopter survey



first name	last name	date
address		apt. #
city	state	zip
home phone ()	work phone ()	email

1	I would consider my household to be like	A library	Middle of the road	A carnival	
2	I am comfortable with a cat that likes to play "chase my ankles" and similar games	No	Somewhat	Yes	
3	I want my cat to interact with guests that come to my house	Little of the time	Some of the time	All of the time	
4	How do you feel about a boisterous cat that gets into everything?	Love them but rather not to live with them	Depends on the situation	Fine by me	
5	My cat needs to be able to adjust to new situations quickly	Not important	Somewhat	Yes	
6	I want my cat to love being with children in my home	It's not important whether my cat loves being with children	Some of the time	Most of the time	Children do not often come to my house
7	My cat needs to be able to be alone	More than 9 hours per day	4 to 8 hours per day	Less than 4 hours per day	
8	When I am at home, I want my cat to be by my side or in my lap	Little of the time	Some of the time	All of the time	
9	I want my cat to enjoy being held	Little of the time	Some of the time	Most of the time	
10	I need my cat to get along with (circle all that apply)				Dogs Cats Birds Other
11	My cat will be	Inside	Inside and Outside	Outside	
12	I have lived with cats before	No		Yes Date _____	Currently
13	I prefer my cat to be talkative	No		Yes	It's not important if my cat is talkative
14	I want my cat to play with toys	Little of the time	Sometimes	Often	
15	I want my cat to be active	Not very active at all	Somewhat	Yes, very	
16	It is most important to me that my cat _____ (fill in the blank)				
FOR OFFICE USE ONLY		RECOMMENDED COLOR MATCH: PURPLE ORANGE GREEN RECOMMENDED FELINE-ALITY™(IES) _____			

Have you ever adopted an animal from Harbor Humane before?

Emergency Contact (for microchip): Name: _____ Phone Number: _____

___ Yes, I consent to the release of my name and telephone number to anyone that finds my pet.

___ No, I prefer that communication only be through 24PetWatch.

Are you over 18 years of age? **Yes No**

Are you a member of any branch of the U.S. military (active, reserve, or veteran)? **Yes No**

In which type of home do you live? **House Mobile Home Apartment Duplex Condo Other**

Do you own or rent your home? Landlord's Name/Phone# _____

Who will be primarily responsible for the care of your companion animal? _____

Do you plan on declawing the cat? _____

Please list all current animals

Type	Name	Breed	Age	Sex	Spayed/Neutered	Indoor/ Outdoor	How long owned?

Name of current Veterinarian: _____

Phone Number: _____

Under whose name and what address are records kept? _____

I authorize my veterinarian to release medical records to Harbor Humane Society. _____ initial

During the adoption process, we will explain this new pet's medical and behavioral history.

Please check any additional topics you'd like to discuss: Feeding this pet Microchips and identification Introducing new pet Grooming / Nail trimming House / Litter box training Training tips / Methods Finding a veterinarian Puppy / Kitten proofing Finding a trainer Declawing Exercise, toys and fun activities Breed characteristics Crate training Vaccines Preventative Care

Other questions: _____

Certifications, Authorizations, Releases, and Understanding

1. I certify that all statements on this adoption application are made truthfully and without evasion, and further understand that such statements may be investigated and if found to be false will be sufficient reason for not being allowed to adopt from Harbor Humane Society.

2. I authorize Harbor Humane Society to contact any reference(s), my veterinarian(s) and anyone else Harbor Humane Society deems necessary to confirm how I have cared for my companion animals.
3. I authorize my veterinarian (s) to release to Harbor Humane Society all veterinary records of the animals I own or have owned.
4. I understand that, with proper care, cats can live 15 years or more and I am prepared to commit myself to the long-term care and protection of any animal I adopt from Harbor Humane Society.
5. I understand the declaw policy of Harbor Humane Society and will abide by the policy. A copy of the policy can be given to me upon request.
6. I understand that animal(s) I adopt from Harbor Humane Society may require veterinary medical or health treatment beyond that provided by Harbor Humane Society. Such additional veterinary medical treatment could be costly. I acknowledge that Harbor Humane Society is not responsible for providing any additional veterinary treatment or the incurring cost of any additional veterinary treatment provided by veterinarians I select to provide such treatment.
7. I understand that otherwise specified, the cat I am adopting is an indoor cat only. I also understand that
8. I understand there are common health problems to watch for in cats. I am aware that dogs may have been exposed to feline leukemia, upper respiratory virus, feline distemper (panleukopenia), ear mites, and internal and external parasites. I understand that this list is not conclusive of all health issues that may affect your cat. I acknowledge this and understand that Harbor Humane Society will provide information on these diseases upon request. I understand that even though cats are vaccinated upon intake, they could still become ill with any of the above conditions because vaccines do not provide immediate protection and because the cat may have been incubating the condition before being admitted to the shelter. I understand that there is simply no guarantee that the animal I adopt may not become seriously ill after I have taken it home. I understand that in their incubation stage, viruses are not detectable. Therefore, an adopted animal may look healthy on the day of adoption and begin to show symptoms of an illness a few days later, at my home. I understand that apart from the measures Harbor Humane Society takes in trying to keep shelter animals healthy, there are no other reasonable, affordable precautions that Harbor Humane Society can take to prevent your pet from becoming ill after adoption. I understand that the animal I am interested in adopting has the potential to require medical treatment that could result in veterinary medical bills. I will not hold Harbor Humane Society accountable for the cost of any treatment the cat may require after adoption.
9. I will not sell or give away any animal(s) I adopt from Harbor Humane Society. As long as I live in the service area of Harbor Humane Society, I agree to return the animal(s) to Harbor Humane Society in the event I cannot keep or choose not to keep the animal(s). If I move from the area and cannot keep or choose not to keep the animal(s), I agree to take the animal(s) to the local humane society of comparable local animal welfare organization.
10. I understand the return policy listed below
 - a. If the animal is returned:
 - i. Within two (2) weeks for any reason I may request a one-half refund or full exchange for another animal (one exchange limit). If exchanged, I understand I will need to pay for a new dog license. Exchanges will be valid for up to 30 days after submission of the original application. Extensions can be granted for good cause by a member of the leadership team.
 - ii. Within four (4) weeks for aggression or health reasons, I understand that I may receive a refund. Health and aggression reasons may not include ailments the animal had and I knowingly accepted at the time of adoption. If returned for health reasons, the condition must be documented by a veterinarian.
 - iii. Within four weeks for any reason, I understand I can make an exchange for another animal (one exchange limit). If exchanged, I will pay for a new dog license. Exchanges will be valid for up to 30 days after submission of the original appeal. Extensions can be granted for good cause by the leadership team.
 - iv. Beyond 4 weeks but within 6 months for any reason, I understand I can return the animal without having to pay a surrender fee.
11. I understand that the handling of animals that I may meet place me in a hazardous situation and could result in injury to me or my personal property. On behalf of myself, my heirs personal representatives and assigns, I hereby release discharge, indemnify and hold harmless Harbor Humane Society and its directors, employees, and agents from any and all claims, causes of action and demands of any nature, whether known or unknown, arising out of or in connection with my meeting an animal for the purpose of adoption.

Applicant's name printed

Applicant's signature and date

Do you consent to Pethealth Inc. collecting and using your personal information (phone and email) for the purposes of contacting you in regards to your adopted animal including contacting you regarding the gift of insurance?

Yes___ No___