





CAT ADOPTION SURVEY

List activities you will typically do with the cat:

Name							Date		
						<u> </u>			
Address			City			State/Zip			
Primary Phone Secondary Phone		Secondary Phone	Email						
	These questions are not used the cat you do	d to determine whether o adopt will fit comfortably						at	
	years of age or older? Yes N or RENT? If you RENT or live in a		nes what is	the cat no	licv?				
Routine Liv		recommunity with garden	ires, what is	the cut po	<u>-</u>				
	<u>currently</u> have in my home are:								
Туре	Name	Breed	Age	Gender	Spayed / Neutered	Indoor / Outdoor	How long owned?	Last Vet Visit	
	rinary hospital or clinic do you use se name(s) are the records kept? _								
The househ	old for my new pet would be desc	cribed as: (check one):	slo	w/quiet	middle o	f the road	busy/active		
People m	y new cat will have frequent/reg	ular contact with (e.g. eld	derly, youn	g children,	daily, weekend	ls, etc.):			
Mypows	at will:		Yes	No	Additional com	monts			
My new cat will: Have other pets come to our home for visits, etc.				NO	Additional Con	IIIIEIILS			
	dates with pets of other friends/f								
	rovide scratching posts	,							
	now many hours per day?								
שב מוטוופ ו	low many nours per day:								

statements may be investigated and if found to be false will Humane Society of West Michigan, or Kent County Animal S I understand that the organizations have the right to deny a I understand that the handling of animals that I may meet m property. On behalf of myself, my heirs, personal represent Society, Humane Society of West Michigan, and Kent Count causes of action and demands of any nature, whether know purpose of adoption. I understand that I am applying to adopt a shelter cat. Ther medical care once adopted.	helter. ny survi nay plac atives a y Anima n or un e are no or Huma al.	ey as d e me ir nd assi al Shelt known o guara	eeason for not being allowed to adopt from Harbor Humane Society eemed necessary. In a hazardous situation and could result in injury to me or my person gns, I hereby release, discharge, indemnify, and hold Harbor Human er and its directors, employees, and agents from any and all claims, arising out of or in connection with my meeting an animal for the intees of behavior or health. I am willing to assume all costs for care iety, Humane Society of West Michigan and Kent County Animal
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at topics you would like to discuss with your adoption Counselor tifications, Authorizations, Releases and Understandings	de truth		nd without evasion, and further understand and agree that such
rimarily be an inside cat			
o to the home with friends/relatives while we are out of town			
teract with children who visit but who don't live with me			
ly new cat will:	Yes	No	Other – please explain
ial Interaction:			
ly ideal cat would: Give any feedback that would help us find the perfect cat for you.)			
ne amount of time I feel is reasonable for my new cat adjust to my home?			
adjust to my home?			



CAT ADOPTION SURVEY- Addendum

Name				te		
Address	City			State/Zip		
rimary Phone Secondary Phone		Email				
**You do not need to fill out the portion abo	l ove if you have filled out	the main Cat A	 doption Survey at Hark	or Hur	nane Society	_
These questions are not use the cat you do	ed to determine whether o adopt will fit comfortab	,	•			
I would like to have my new cat declawed?	Ol want a cat that is already declawed			Ounsure		
I am willing to take on a cat that requires reg	○Yes ○N	0				
I am interested in adopting a special needs c	at (medical or behaviora	I)?	es ONo			
If so, I am most comfortable working	ng with:					