


Lynn's Animal Rescue

- A Labor of Love 

Application for adoption

Our organization prides itself on successful adoptions. Your application will aid us in this endeavor as well as enable us to assist you with choosing a pet that is compatible with your lifestyle.

Are you interested in adopting a particular cat? If yes, cat name? _____

If not, tell us what are you looking for: Cat / Kitten | Color _____ | Gender M / F

Previously declawed Y / N | Age Range from ___ to ___ months / yrs

1. Your Name _____ E-Mail Address _____

2. Address _____ City _____ ST__ Zip _____

3. Home Phone (____) ____ - _____ Cell Phone (____) ____ - _____ Text? Y / N

4. Length of time at this address _____ Own ___ Rent ___

5. List everyone living in your home:			
Name	Phone #	Cat Allergies? Y/N	Age (if not over 18)
a.			
b.			
c.			
d.			

6. Do you live with: ___Parents | ___Relatives | ___Friends

Military Housing / House/Condo / Apt/Other

7. If renting: Landlord's Name _____ Phone # Cell Phone (____) ____ - _____

8. Why do you want to adopt a cat?

9. Have you ever owned a cat? Yes / No

10. Do you plan on having this cat/kitten declawed? Yes / No

11. Will this cat go outside? Yes / No

12. What will you feed your cat? _____

13. How many hours a day will this cat be without human companionship? _____

14. What will you do with your cat in the event that you:

A. Are unable to care for your cat? _____

B. Separate from your significant other? _____


C. Move? _____

D. Go on vacation? _____

Date: __/__/2012

ID# _____

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15. What pets do you have now? What pets have you had in the last 10 years?						
Have Now?	Species		Name	Fixed	Declawed	Go outside
Y / N	Cat	Dog		Y / N	Y / N	Y / N
Y / N	Cat	Dog		Y / N	Y / N	Y / N
Y / N	Cat	Dog		Y / N	Y / N	Y / N

16. Have you ever surrendered an animal to a rescue or shelter? Y / N

17. Do you have a vet now or did you have one in the past? Y / N

Vet's name _____ Phone (____) ____ - _____ How long? ____

18. If you don't have a vet reference, please list 2 personal references that know you very well (example: family, friends, neighbor)		
Name	Phone number	Relationship to you

19. Present place of employment _____

Length of time? _____ Work phone (____) ____ - _____

How did you hear about us? _____

Are you okay with Lynn doing a home visit before and/or after your adoption? Y / N

When would you like to take your adopted pet home? _____

I certify that all of the above info is true. I hereby authorize the release and disclosure of any records needed to process this application. I understand that any false info given will automatically disqualify me from adopting from Lynn's Animal Rescue.

Lynn's Animal Rescue reserves the right to deny any application it deems unsatisfactory.

If for any reason you cannot keep this animal, you legally must return him/her to Lynn's Animal Rescue. If you wish to place this animal into a new home, you must first notify Lynn's Animal Rescue for approval and change of information.

Adoptee Signature: _____ Date: __/__/2012

Rep accepting application: _____ Date: __/__/2012

Approved / Denied by _____ Date: __/__/2012