

Branford Compassion Club Cat Adoption Application

Branford Compassion Club (BCC)
2037 Foxon Rd. North Branford, CT 06471
(203) 483-6369
contact_us@branfordcompassionclub.org
www.branfordcompassionclub.org

IMPORTANT: This form must be completed in Adobe Acrobat. Please do not attempt to edit the form in another program (such as Preview on a Mac), as it may not save your information correctly. Complete the form, save a finished copy to your computer, then attach to an email to us. Applicant must show proof they are at least 18 years of age or have parental consent. BCC will not process incomplete applications.

Name _____ Date _____
Street Address _____ Town _____ Zip Code _____
Cell phone _____ Home phone _____ Email address _____

Description of cat(s) you would be interested in (male/female, long/short haired, cat or kitten, color, etc.) Please describe the temperament and activity level you are looking for in a feline (lap cat, independent, talkative, etc.)

How did you hear about BCC?

Household Information

Where do you live? Condo House Apartment Mobile Home Do you... Own Rent

How long have you lived there?

Are you allowed to have cats? Yes No Unsure

Please provide contact information for landlord if you rent. (Lease with pet provision must be presented or rental permission form to be completed by landlord.)

Are there children in your home? Yes No If yes, how many and what ages?

Are all members of your household aware of your plans to adopt a cat? Yes No Unsure

Are any members of your household allergic to cats? Yes No Unsure

What would you do with your cat if a member of your household became allergic to your cat?

What would you do with your cat/s if you had to move?

Are you? Working Attending School Retired Other

How many hours a day will your cat be alone?

Veterinary History Please include all vets you have used in the past 5 years, using additional space if necessary. Please call all listed veterinary offices and give them your permission to talk to us when we call.

Name of 1st veterinarian _____ 1st Veterinarian phone # _____

Number of years affiliated with 1st vet _____

Name of 2nd veterinarian _____ 2nd Veterinarian phone # _____

Number of years affiliated with 2nd vet _____

Branford Compassion Club Cat Adoption Application

Names of living pets

Names of deceased pets

Are you prepared to take your new cat/s for updated vaccinations and medical treatment for their lifetime? Yes No

Other

Who will be responsible for your cat?

If the cat's primary caretaker becomes unable to care for it, what is the contingency plan in place for the animal's care? (Many cats live to 15-20 years of age.) Please list short term and long-term plans, if they differ. Please include contact information for person designated as contingency provider.

References These people should not be family members. Friends and co-workers make great references!

Name	Name
Phone #	Phone #
Email address	Email address

Companion Animal History

Do you currently have cats? Yes No If yes, how many? Are they spayed/neutered? Yes No

How long have you had your cat/s?

Have you had cats in the past? Yes No If yes, please answer the questions below.

Were they spayed/neutered? Yes No Unsure Have you had a previous cat die? Yes No

If yes, how did the cat/s die?

Have you ever lost a cat? Yes No

If yes, please explain.

Did the cat/s live strictly indoors? Yes No Unsure Were the cat/s declawed? Yes No Unsure

Will your new cat live strictly indoors? Yes No Unsure

Will you declaw your new cat? Yes No Unsure

If your thoughts/plans on these questions have changed, please explain why.

Do you have a dog? Yes No If yes, how many? Do your dogs live indoors? Yes No

Do you have other pets? Yes No

If yes, please list what type and how many.

When complete, please email the form to contact_us@branfordcompassionclub.org or bring it with you to the shelter, Saturday 11am- 3pm. We are located at 2037 Foxon Rd, North Branford. We will reply as soon as possible and look forward to talking to you soon. Thank you.