



Name of Cat: _____

Today's Date: _____

A COMPASSIONATE APPROACH TO ANIMAL WELFARE

WCGHS CAT ADOPTION APPLICATION & QUESTIONNAIRE

Welcome to the West Columbia Gorge Humane Society Adoption Program. Thank you for making adoption an option! The following information is required so we can assist you in the selection of your new forever friend. This application helps us determine if the adoption is in the animal's best interest and to assist you in finding an animal most compatible with your expectations and lifestyle. The adoption process includes verifying information, meet and greets, paying adoption fees and signing legal contracts.

REQUIREMENTS FOR ADOPTION: *Please review.*

- Adoption must be for placement within your household.
- Adopter must be 18 years of age or older.
- If you are married, or currently living with a significant other, that person's information must be included where the application asks for Co-Applicant information.
- WCGHS requires a meet and greet with all members of the household.
- Adopter agrees to keep the cat as an indoor-only cat.
- If renting, adopter must provide a copy of the rental pet agreement from the landlord.
- By signing this document, adopter gives permission to WCGHS to contact current/past veterinary offices, landlord, references, or perform a home visit(s) by authorized shelter staff.
- Adopter agrees to notify us of developing behavior issues and work with us to resolve them.
- Animal is not to be sold, traded or given away.

APPLICANT CONTACT

Name: _____ Co-Applicant Name: _____

Relationship to Co-Applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____ Driver's License #: _____

APPLICANT INFORMATION

How did you learn about this cat for adoption? _____

Why do you wish to adopt at this time? _____

Is this your first experience owning a pet? _____

Have you discussed this adoption with all household members and is everyone in agreement? Yes No

Housing: Home: Apartment: Condo: Other: _____

Rent: Own: Live with Parents/Relatives: Other: _____

Landlord/Property Manager: _____ Phone: _____

Does your Landlord know you are adopting a new pet? Yes No Any restrictions: Yes No

Are there children who live in the home? Yes ___ No ___ Ages: _____

Are there children who visit regularly? Yes ___ No ___ Ages: _____

Are there other pets in the residence? Yes ___ No ___

List species, breed, age, sex, and if the pets are indoor, outdoor, or both, spay/neutered and vaccinated:

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

How many hours will this animal usually spend alone each day? _____

Please circle all that will apply:

Type of cat you are looking for: Playful Active Talkative Quiet Solitary Lap cat Couch Potato Affectionate

Are you open to a cat who is: Shy Aloof Fearful Withdrawn Shy to visitors Shy to family Feisty

Usual household lifestyle this animal will experience in your home: Quiet Solitary Laid Back

Peaceful Indoor Outdoor Active Very Busy On the Go Frequent Visitors Children under 5 Noisy/Loud

How long will you give this animal to adjust to your home and lifestyle? _____

Have you or your family member requested a cat be declawed in the past? ___ Yes ___ No When? _____

Other than the pets currently in your household, in the last five years, have you had any pets and where are they now? _____

In the last five years, have you lost any companion animal due to theft, disappearance, traffic accident, poison, disease, euthanasia for any reason, or surrender to a person or organization? Yes ___ No ___

Please explain: _____

REFERENCES:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name, address, and phone of past and current/new veterinarian:

By my signature below I authorize named veterinary clinic(s) to release information to WCGHS

I hereby certify that the above information is true and accurate to the best of my knowledge and that completion of this application is not a guarantee of placement.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

Mailing Address: PO Box 270, Washougal, WA 98671 | Physical Address: 2675-2695 S. Index Street, Washougal, WA 98671

Dog Shelter: (360) 335-0941 | Cat Shelter: (360) 835-3464 | Fax: 866-373-1836

Email: adoptions@wcghs.org | Website: www.wcghs.org | Facebook: www.facebook.com/wcghs