FOR STAFF USE ONLY Description of pet applying for:						
Breed Waiting List?:Approved			_Yes	Staff Initials	No	_



## **Barn Cat Application**

Date: / /
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## Please Note:

- 1. A completely filled out and approved application is needed to adopt a pet.
- 2. Pets are adopted on a **FIRST COME FIRST SERVE** basis.
- 3. Adopters must come to the shelter within 24 hours of adoption finalization (when pet can leave building) to get the pet or someone else may adopt it.
- 4. Adoption price includes spay or neuter, FVRCP, Rabies Vaccine, and 24-hour pet watch microchip.

City:				
	Home#: <u>( ) -</u>			
Email Address:	(for shelte	er use only—your info will remain	confidential)	
Alternate Contact Information:	Name:	Relationship:		
	City:			
	- ,		-	
<u>Description of Residence</u> House	Do you rent? Do <b>You</b> Ow  Property owner's name:		er?	
	Property owner's name:  Property owner's phone:  How long have you lived there?			
House Mobile home Duplex Other;	Property owner's name: Property owner's phone: How long have you lived there? # Adults in household:	?		
House Mobile home Duplex Other; Do you live here full time?	Property owner's name: Property owner's phone: How long have you lived there? # Adults in household: YesNo	Ages of children	า:	
House Mobile home Duplex Other; Do you live here full time?	Property owner's name: Property owner's phone: How long have you lived there? # Adults in household:	Ages of children	า:	
House Mobile home Duplex Other; Do you live here full time?  What is the size and description or	Property owner's name: Property owner's phone: How long have you lived there? # Adults in household: YesNo	Ages of children	n:	
House Mobile home Duplex Other; Do you live here full time?  What is the size and description of Describe the structure in which ca	Property owner's name: Property owner's phone: How long have you lived there? # Adults in household: YesNo f your property?	Ages of children	n:	

## Please list all cats/dogs currently living at your address, & any you have owned in the last 3 years:

<u>Species</u>	Name/age	Sex	Neutered	<u>Rabies</u> Vaccinated	Still have? If not, what happened to it?
Dog/Cat		ΜF	Yes No	Yes No	what happened to it?
Dog/Cat		M F	Yes No	Yes No	
_ ~		ΜF	Yes No	Yes No	
Dog/Cat		ΜF	Yes No	Yes No	
Dog/Cat		M F M F	Yes No Yes No	Yes No Yes No	
Dog/Cat		IVI F	Tes INO	res inu	
Name, City a	and Phone number of ve	eterinarian with	n medical history o	of animals living at you	ur house:
Animal Care	Information				
Nhy do you v	want a barn cat?				
Barn cats mu	ust be securely confined	d for 3-4 weeks	s. Are you prepare	d to allow for this mu	ch time?
	Ye	s1	No		
Who will be r	esponsible for the barn	cats care?			
Who will care	e for your barn cats if yo	ou are away?_			
Do you agree	e to trap and take to a v	et a barn cat v	vho becomes ill o	injured?	
	_	Yes	No		
Do you agree	e to trap and vaccinate	your barn cats	every year to three	ee years?	
	<u>—</u>	Yes	No		
Read and	d sign below:				
I und	tify the above informa derstand no animals o nals can be held no lo	an be held fo	r me unless this	-	ullifying this adoption. oved, and adopted
Sign	ature:			Date	:
Staff	initials/comments:				
Th	e Aggieland Huma	ne Society i	reserves the ri	ght to refuse ado	ption to anyone.

File: Barn Cat Application