

<b>FOR STAFF USE ONLY</b>	Card #: _____
Description of pet applying for: _____	
Breed Waiting List?: _____	Yes _____ No _____
Approved _____ Denied _____	Staff Initials _____



# Barn Cat Application

Date (mm/dd/yyyy): \_\_\_\_\_

- 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.

Applicant's name: \_\_\_\_\_

Local Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Driver's license #: \_\_\_\_\_ Home#: \_\_\_\_\_ Other#: \_\_\_\_\_

Email Address: \_\_\_\_\_ (for shelter use only—your info will remain confidential)

**Alternate Contact Information:** Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

**Description of Residence** Do you rent? \_\_\_\_\_ Do You Own? \_\_\_\_\_ Other? \_\_\_\_\_

_____ House	Property owner's name: _____
_____ Mobile home	Property owner's phone: _____
_____ Duplex	How long have you lived there? _____
_____ Other; _____	# Adults in household: _____ Ages of children: _____

Do you live here full time? \_\_\_\_\_ Yes \_\_\_\_\_ No

What is the size and description of your property? \_\_\_\_\_

Describe the structure in which cats will be housed: \_\_\_\_\_

How far from the road/traffic is your barn located? \_\_\_\_\_

Volume of traffic? \_\_\_\_\_ Light \_\_\_\_\_ medium \_\_\_\_\_ heavy **Speed Limit:** \_\_\_\_\_

If you were to sell/move your property/house, what would your plan be for the cats? \_\_\_\_\_

**Continues on Back!**

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

<u>Species</u>	<u>Name/age</u>	<u>Sex</u>		<u>Neutered</u>		<u>Rabies</u>		<u>Still have? If not, what happened to it?</u>
						<u>Vaccinated</u>		
Dog /Cat	_____	M	F	Yes	No	Yes	No	_____
Dog /Cat	_____	M	F	Yes	No	Yes	No	_____
Dog /Cat	_____	M	F	Yes	No	Yes	No	_____
Dog /Cat	_____	M	F	Yes	No	Yes	No	_____
Dog /Cat	_____	M	F	Yes	No	Yes	No	_____
Dog /Cat	_____	M	F	Yes	No	Yes	No	_____

Name, City and Phone number of veterinarian with medical history of animals living at your house:

\_\_\_\_\_

**Animal Care Information**

Why do you want a barn cat? \_\_\_\_\_

Barn cats must be securely confined for 3-4 weeks. Are you prepared to allow for this much time?

\_\_\_\_\_Yes \_\_\_\_\_No

Who will be responsible for the barn cats care? \_\_\_\_\_

Who will care for your barn cats if you are away? \_\_\_\_\_

Do you agree to trap and take to a vet a barn cat who becomes ill or injured?

\_\_\_\_\_Yes \_\_\_\_\_No

Do you agree to trap and vaccinate your barn cats every year to three years?

\_\_\_\_\_Yes \_\_\_\_\_No

Read and sign below:

***I certify the above information is true, and false information may result in nullifying this adoption. I understand no animals can be held for me unless this application is approved, and adopted animals can be held no longer than 24 hours.***

Signature: \_\_\_\_\_ Date(mm/dd/yyyy): \_\_\_\_\_

Staff initials/comments: \_\_\_\_\_

**The Aggield Humane Society reserves the right to refuse adoption to anyone.**