

Date _____



| |
|------------------------|
| OFFICE USE ONLY |
| ANIMAL NAME: _____ |
| SB# _____ |
| MICROCHIP # _____ |

CAT Adoption Questionnaire

At the East Bay SPCA, we are committed to finding appropriate lifelong homes for shelter animals. We ask adopters to make the same commitment to the animals they adopt. Please take time to answer the questions below so that we can help you adopt the animal best for you. **Adopters must: 1) be at least 18 years of age 2) have legal photo identification 3) be able to have a pet at your address 4) pay the adoption fee**

Name: _____ ID/DL#: _____

Address: _____ City/Zip: _____

Phone (Primary): _____ Email _____

Yes, I'd like to receive email news from EBSPCA

Alternate Contact: Please list contact info for a person who lives outside the home (for Microchip Registration):

Name: _____ Ph: _____

List everyone who lives in the home, including children, roommates, and extended family. (include: Name, Relationship & Age if under 18)

Are all the members of your household in favor of adopting an animal? Yes No

Do you presently have any pets? (list type and age, if any) _____

Have you had a cat in the past? No Yes : What happened to them? _____

What qualities are you looking for in your new cat? _____

What behaviors would you not be able to tolerate in the cat/kitten?

- Scratching furniture Plays at night Very Energetic Shedding Talkative/Vocal
- Digging in Plants/Garden Playful Biting/Scratching Needy Aloof Shy
- Selective with other animals Selective with people Uncomfortable with children

OTHER? _____

Where will the cat be during the day? Indoors Outdoors Other _____

Where will the cat sleep? Describe: _____

How do you feel about de-clawing? _____

How would you respond if your animal demonstrated behavior you did not desire? _____

Is there anything else you would like us to know, or may have concerns about? _____

Our average cost to shelter an animal is \$700—and much more for long-term animals. Since that is more than our adoption fees, we rely on individual donations to close the gap. **Would you like to donate to the East Bay SPCA?**

If Yes, How much? _____ *Thank you for your donation to help ensure healthy, happy lives for East Bay animals.*

I certify that the above information is true and correct to the best of my knowledge. I understand that any false information may result in nullifying the adoption.

Signature _____

Date _____