



BRHA Cat Adoption Questionnaire & Agreement

(Must be 18yrs. of age to apply)

I/We are interested in (name of animal) _____

First and Last name of all adults: _____

Street Address: _____ Mailing: _____

City: _____ State: _____ Zip Code: _____

Phone: (_____) _____ Phone: (_____) _____ Email*: _____

***By providing your email your adopted cat may receive 30 days of Basic Pet Insurance**

Would you like to be added to our BRHA emailing list? Yes _____ No _____

Do you own / rent? **(Circle one)** If renting, BRHA must obtain landlord's permission prior to the adoption of a cat.

BRHA Staff Initial Yes _____ No _____

Landlord's Name: _____ Phone: (_____) _____

The animals in this shelter have come from a variety of backgrounds; we want to ensure you and your new pet will be happy.

Please provide us with some information:

- How many pets do you have?
Dogs _____ Cats _____ Livestock _____ Other _____
- How much interaction will your cat(s) have with children? _____
- What would a typical day look like for you and your cat? _____
- If the cat will be outdoors what kind of shelter will be provided?

- Are any members of your household allergic to cats? Yes _____ No _____
- Give us a short description of your home, yard, and type of neighborhood

- There are many medical complications and drawbacks to having a cat declawed.
Are you are looking for a declawed cat? _____. *We may have some here that are already declawed.*

We encourage you to bring the whole family to be sure that everyone is in agreement!

Do you have a veterinarian? _____ If yes, who? _____

*We will provide you a list of participating veterinarians, for your new adoptive cat to receive a **Free Wellness Exam**.*

Your new cat is microchipped; please provide an emergency contact (other than yourself):

Name: _____ Phone: (_____) _____

By adopting this animal, all owners are expected to provide protective housing, a nutritional diet, proper veterinary care and a lifelong companionship for their new pet. The Bitter Root Humane Association reserves the right to schedule a home visit prior to or after adoption to ensure the wellness of our adopted animals. The BRHA may be contacting you via email or phone to see if you have any questions or concerns with the new adoptive pet's adjustment to their new home. Under the terms of this agreement, adoptive owners that are no longer able to care for the adopted animal must return said animal to The Bitter Root Humane Association, who will arrange for re-homing. We have their records on file and their best interests in our hearts.

Your Signature: _____ Date: _____

The Bitter Root Humane Association is a private, non-profit organization and reserves the right to refuse an adoption.

For use by staff only:

Adoption Approved: Staff _____, Staff _____ Date: _____

Adoption Denied: Staff _____, Staff _____ Date: _____

Brief reason of denial _____

Notes:

Entered PetPoint _____