



BV • CATS, INC.

Cat Adoption Application

Welcome to BV Cats adoption program. We request the following information so that we can assist you in the selection of a new cat. This form and a consultation with a BV Cats representative are designed to help you find the cat most compatible with your lifestyle. Please mail this form to BV Cats, Inc., PO Box 819, Northbridge, MA 01534.

To be considered as an adopter, you must:

- Be 21 years of age or older
- Have identification showing your present address
- Have the knowledge and consent of your landlord
- Be able and willing to spend the time and money necessary to provide medical treatment and proper care of the cat

Name of applicant _____ Date _____

Street address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____ Age _____

How long have you lived at this address? _____

Are you adopting for yourself or someone else? _____

Describe in detail the cat you're looking for: _____

What kind of pets have you had in the past? _____

Which of these do you still have? (Include age, sex and breed.) _____

Have they been spayed or neutered? Yes No Don't know

Are they current on vaccinations? Yes No Don't know

Have they been tested for feline leukemia? Yes No Don't know

Have they been tested for FIV? Yes No Don't know

Are they declawed? Yes No Don't know

If yes, where is the cat declawed? Front paws All four paws

What happened to the pets you no longer have? _____

Have you ever turned your cat in to a shelter? Yes No If yes, please explain:

Have you ever had a pet euthanized? Yes No If yes, please explain:

If you have pets, will they adjust to a new cat in the house? Yes No Don't know

Why do you want this cat? (Please check all that apply.)

- Companion
- Companion for other pet
- House pet
- Barn cat
- Mouser
- Office cat
- Other (explain) _____

How many adults are in your family? _____ Children? _____ Children's ages? _____

Does any member of your household have an allergy to cats? Yes No

Where do you live? House Apartment Condo Mobile home Other _____

Do you own or rent your home? Own Rent

If you rent, may we contact the owner to obtain permission for this cat to live in your home?

Yes No Owner's name and phone number: _____

What is your current occupation? _____

Name of employer: _____

Does your job require extensive travel? Yes No

Where will your cat live? In the house Outdoors With free access to both indoors and outdoors In the barn In the garage

Please explain: _____

Do you have screens on your windows? Yes No

Do you have a cat or dog door? Yes No Where does it lead to? _____

Under what circumstances would you have the cat declawed? _____

Are you aware of the potential side effects of declawing a cat? Yes No

Will you keep the cat up-to-date on vaccinations? Yes No

Who is your veterinarian? _____ Phone _____

City/state _____

If you go away for a few days, or on a vacation, who will take care of the cat?

What arrangements will you make for the care of your pets in case of an emergency, or if you become unable to care for him/her?

If you move, will you take the cat with you? Yes No

Have you ever applied to BV Cats before to adopt an animal? Yes No
If yes, when? _____

Have you ever brought animals to BV Cats? Yes No
If yes, please explain: _____

How did you find out about BV Cats? _____

Are you willing to have a representative of BV Cats come to see where the cat will be living? Yes No If no, explain: _____

Are you aware that cats can live 15 to 20 years and are you willing to take responsibility for this cat for the next 10 to 20 years? Yes No

Additional comments from applicant: _____

Please provide two personal references:

Name of reference #1 _____

Street address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Name of reference #2 _____

Street address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____
