

# The Victoria Cat Rescue Corps Society

P.O. Box 5478 LCD9 V8R 6S4

~ An incorporated society dedicated to alleviating the suffering of cats and all animals ~

## ADOPTION APPLICATION

Applicant's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Best time(s) to phone you: \_\_\_\_\_

The Victoria Cat Rescue Corps seeks loving, permanent homes in which to place the many abandoned pets that are brought to our attention. We thank you for the generosity that prompts your interest in these needy animals. To help us determine the safety and suitability of your home for a new pet, please answer the following questions:

1. What sort of pet are you looking to adopt?

cat only     dog only     cat or dog     other pets (specify): \_\_\_\_\_

2. As part of our mandate, all pets we place in homes are spay/neutered before leaving our care. With that understanding, do you have a preference as to whether the spay/neutered animal you would adopt be male or female?

male only     female only     either

3. Any particular details of breed, size, colour, long/short hair, et cetera, that you are particularly seeking in a pet?

\_\_\_\_\_

4. Please indicate what energy level and personality type you would be looking for in a pet:

sedate     lively     very lively  
 very affectionate/needy     affectionate but independent     not at all needy

5. Do you prefer a pet that requires:

no grooming     very little grooming     moderate grooming     a lot of grooming

6. Consider your average day -- how long would the adopted pet typically be without a human in your home?

0-3 hours     3-6 hours     6-8 hours     Over 8 hours     Some overnights     Frequent overnights

7. Are you 19 years of age or older? \_\_\_\_\_  yes  no

8. Do you have children under 19 years?  yes (please list ages of each): \_\_\_\_\_  no

9. Do you or any members of your family suffer from allergies?     yes     no    If yes, please indicate which type(s):  
 animal fur     animal saliva     animal dander     litter dust     feathers     other: \_\_\_\_\_

10. Please indicate the pets you currently have: (Check all that apply -- attach a separate sheet to list multiple pets)

Cat    Breed: \_\_\_\_\_  spay/neutered?     indoor  outdoor     vaccinated within the past year?  
 Dog    Breed: \_\_\_\_\_  spay/neutered?     indoor  outdoor     vaccinated within the past year?  
 Rabbit     Ferret  Bird     Fish     Reptile     Rodent  
 Other (please specify): \_\_\_\_\_  None

11. May we contact your regular veterinarian for a reference? (If you do not have a veterinarian, please provide another character reference and his/her relationship to you.)     yes  no

Vet Name/Other Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

12. Would you agree to a "site visit" of your home by members of Victoria Cat Rescue Corps?  yes  no

13. Why do you want to adopt a pet at this time? (Check all that apply)

To replace a pet which has died or been put down     To teach children about responsibility     For companionship  
 As a barn cat/mouser     For personal protection or to guard property     For hunting     Other: \_\_\_\_\_

14. How often are you prepared to take your adopted animal to a veterinarian?  
 once a month       once a year       once every two years       when symptoms of illness appeared

15. How much money would you expect to spend in a year on your pet, including food, supplies, and veterinary care?  
 \$5-\$100       \$100-300       \$300-500       \$1,000+

16. For which of the following behaviours would you consider having your pet euthanized?  
 clawing/chewing furniture, drapes, clothing       excessive meowing/barking       aggression toward children  
 aggression toward other pets       urination/defecation on carpets/furniture       other: \_\_\_\_\_

17. What will you do with your new pet when you go out of town?  
 Take it along       Hire a pet sitter       Boarding kennel       Leave with friends       Other

18. What will you do with your new pet if you need to move?  
 Take it with you       Leave it with friends       Surrender to SPCA/shelter       Find it a new home

19. How long have you been at your current address? \_\_\_\_\_

20. What size is your yard?       no yard       small (condo/townhouse)       medium (city lot)       large

21. Is your yard completely fenced?       yes       no  
If yes, with what type of fencing?       chain link       solid wood       wire mesh       picket       barbed wire       electric

22. How much time would you expect to keep your pet indoors?  
 indoors at all times       outdoors at all times       outdoors during the day       outdoors during the night  
 free access to outdoors (e.g. through pet door) at all times

23. Are there any major changes planned for your household in the next year (e.g. moving, new baby, major reno, etc.)?  
 yes       no      If yes, please explain: \_\_\_\_\_

24. Have you ever had a pet spayed or neutered?  
 yes       no       not applicable (never had a pet, or received one previously neutered)

25. Have you ever had a cat declawed?  
 yes       no       not applicable (never had a pet, or received one previously declawed)

26. Have you ever had a pet euthanized?  
 yes       no       not applicable  
If yes, please describe the circumstances: \_\_\_\_\_

27. Have you ever surrendered a pet to the SPCA or other humane society/shelter?  
 yes       no       not applicable (never had a pet before)

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for completing this adoption application. Please return it to **VICTORIA CAT RESCUE CORPS SOCIETY, BOX 5797, STN B, VICTORIA, BC, V8R 6S8 (250-656-1100)**, so that an adoption counsellor may review it with you. We will make every effort to make the process an expedient and pleasant one for you.

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**STAFF ONLY**

Application reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Site visit/Interview conducted by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments/Concerns: \_\_\_\_\_

Application result:     Approved       Denied