



# Gananoque & District Humane Society

## Cat/Kitten Adoption Application

*Adopting a cat is a long-term commitment, so it is important to involve the entire household when deciding to add a furry companion to your home. All of our cats that are available for adoption are spayed/neutered, dewormed, microchipped, fully vaccinated and have also been treated for fleas! Please complete this form to assist us in determining whether the cat you are applying for is best suited to your lifestyle and home as our main goal is to place all animals into a forever home that is comfortable and suits both the cat and individual's needs. Many factors determine which applicant will be matched with a particular pet. If you are not accepted, it does not mean that you are not considered a good pet owner, it means you and the cat are not a match for success. **All information is kept confidential.***

***The Gananoque & District Humane Society has the right to refuse any adoption to any individual and we will not discuss the reason for refusal. \* IF APPROVED, WE WILL CONTACT YOU\****

### Applicant Information (please print legibly)

Cat/Kitten Name: \_\_\_\_\_

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*First Last*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City Province Postal Code*

Primary Phone#: \_\_\_\_\_ Email: \_\_\_\_\_

### Please answer the questions below

1. Where/how did you hear about GDHS? \_\_\_\_\_  
\_\_\_\_\_

2. Reason for adopting:

- Pet/Companion
- Companion for children
- Mouser
- Barn/farm
- Other: \_\_\_\_\_

3. Who will be the primary caregiver of the cat? \_\_\_\_\_

4. Who are you adopting the cat for? \_\_\_\_\_

5. Are you 18 years or older?  Yes  No

6. Do you plan to move in the next 6 months?  Yes  No

7. Do you plan to go on vacation soon?  Yes  No

If yes, what plans do you have in place for your new family member while you are away?

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8. I live in a...

House                      Apartment                      Townhouse/Unit                      Condo                      Rural Area

If you are renting, have you confirmed with your landlord that pets are allowed?  Yes  No

9. Are you a student/do you plan to attend school in the near future?  Yes  No

If yes, what does the future look like for the cat once you are finished school? \_\_\_\_\_

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10. How many people live in the household? (please write the # of people in the boxes below)

# of Adults                       # of Children/people under 18 years of age

Please list ages of children/people under 18 years of age: \_\_\_\_\_

11. Do you have any pets currently?  Yes  No

If yes, please provide details – quantity, species, age, sex

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If yes, are they:

(A) Updated on vaccinations (including rabies)  Yes  No

(B) Spayed/neutered?  Yes  No

**If you answered no to either of the above questions, please explain why:** \_\_\_\_\_

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If you have pets, are they friendly with other animals?  Yes  No  Unknown

12. If you had other pets in the past, what became of them?

Gave away, rehomed or surrendered

If you selected the above answer, please explain why: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Deceased (How? Examples: Old age, disease/virus, hit by car) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

13. Will your cat stay...

Indoors only

Outdoors only

Indoor/outdoor

14. Are any of your current cats declawed?  Yes  No

Also, do you plan to declaw this cat?  Yes  No

**WHETHER THE ANSWER IS YES OR NO in the above question, explain why you HAVE, HAVE NOT, WILL OR WILL NOT declaw your cats?**

\_\_\_\_\_  
\_\_\_\_\_

15. Have you previously adopted from the Gananoque & District Humane Society?  Yes  No

16. For what reason would you consider rehoming (find a new home for) your cat? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

17. How often will your cat see a veterinarian? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

18. What will be your action plan if your cat becomes sick/ill or is diagnosed with a chronic ailment?

For example: Diabetes, Thyroid issues, Arthritis/pain management, special veterinary diets, etc...

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19. What will you do if your cat starts inappropriately urinating or defecating outside the litter box or stops using it?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

20. What will you do if your cat starts to scratch in places you don't want them scratching?

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21. Are you willing to teach young children the proper care and treatment of this particular animal? Explain

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22. Is anyone in the home allergic to cats?  Yes  No

If yes, how will they handle this situation? \_\_\_\_\_

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23. If you discover, post-adoption, that someone in your family may be allergic, how will you deal with this issue?

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24. Do you have a carrier/kennel to use for transporting?  Yes  No

25. Where do your pets spend their time (indoors, outdoors, etc.)? \_\_\_\_\_

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26. Do you anticipate any difficulties with your current pets accepting the cat(s) you're applying for? Explain

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27. How do you plan to introduce your new pet to your current pets? \_\_\_\_\_

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28. What pet personality type do you feel best suits your personality and lifestyle? Describe (in detail) your own personality and lifestyle: \_\_\_\_\_

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29. What will you do with your adopted cat if the circumstances of your life change (marriage, divorce, baby, move, etc.)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

30. On a scale of 1-10 (1= not at all, 10= very experienced), how do you rate your knowledge of the requirements of a cat/kitten? \_\_\_\_\_

31. On average, how much do you think it will cost yearly to maintain the health of your pet? \$\_\_\_\_\_

32. If you adopt a cat and they start showing signs of illness in the first few weeks in their new home, what will you do?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**References**

***Please authorize your veterinarian to release information to the GDHS. IF YOU DO NOT HAVE A VETERINARIAN, please list 2 personal references.***

***\*DO NOT LIST FAMILY MEMBERS/PEOPLE YOU LIVE WITH AS PERSONAL REFERENCES PLEASE***

**Reference #1: Veterinarian**

Name of Veterinary Clinic/Hospital: \_\_\_\_\_

City of Veterinarian: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**Reference #2: Personal**

Name: \_\_\_\_\_

Contact Information: \_\_\_\_\_

What is the relationship of the reference to you? \_\_\_\_\_

**Disclaimer and Signature**

*By signing below, I certify that the answers and information I provided are true and complete to the best of my knowledge and consent to my references being contacted for the purpose of processing this application.*

*If this application leads to adoption, I understand that the animal **is solely my responsibility once the adoption is finalized.** If for any reason at all I am no longer able to care for/keep the cat, it should be **returned to GDHS.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***\*Please scan and email this completed form to [humanesociety@bellnet.ca](mailto:humanesociety@bellnet.ca)  
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