**B.A.A.R.K.**

**Barrington Area Animal Rescue and Kennels NFP**

**Cat Adoption Application**

Thank you for your interest in adopting a cat from B.A.A.R.K. Dog Rescue.

To initiate the process, we ask that you please complete all questions on the application to follow, to the best of your ability. There are no right or wrong answers. We want to learn more about you and your household, so we can provide the most successful adoption experience possible. Thanks again for your interest in undertaking this lifesaving commitment.

Date of Application (Month/Date/Year):

Applicant’s Full Name:

Applicant’s Age: \_\_\_\_\_\_\_\_\_\_

Spouse/Significant Other’s Full Name:

Applicant’s Age: \_\_\_\_\_\_\_\_\_\_

Applicant’s Full Address:

Home Phone Number:   
Cell Phone Number:

Email Address:

Best time/means to reach you:

Name of the cat you are applying to adopt (if a specific cat is of interest):

Why are you interested in this particular cat?

If not interested in a specific cat, are you interested in a particular type of cat? \_\_\_\_

If so, what type(s)?

**ABOUT YOU**

Occupation – Please provide the name and phone number of your employer as well as the occupation and hours worked (away from home) /day for employed household members.

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| **About You** | | **About Your Partner** | |
| Company Name |  | Company Name |  |
| Address |  | Address |  |
| City/State/Zip |  | City/State/Zip |  |
| Occupation |  | Occupation |  |
| Years at Company |  | Years at Company |  |
| Company Phone # |  | Company Phone # |  |
| Hours Worked (incl commute) |  | Hours Worked (incl commute) |  |

What are your daily hobbies/the activities of interest to you and your family?

**YOUR RESIDENCE**

Do you…

☐ Own a house? ☐ Own townhome/condo ☐ Rent apartment?

☐ Rent a house? ☐ Rent townhome/condo?

☐ Other? Please explain:

How long have you lived at your current address?

If your home is governed by a homeowners association, does it set forth restrictions relating to animal ownership?

☐ Yes ☐ No

If “yes,” will you remain in compliance with the adoption of this cat?

☐ Yes ☐ No

If you rent:

If you rent, does your rental agreement permit pets? ☐ Yes ☐ No

Have you received permission from the landlord to have a pet/additional pets? ☐ Yes ☐ No

Does your rental agreement limit the number of cats/total pets that you may have on your property? ☐ Yes ☐ No

Please provide your landlord’s name and phone number:

Will the cat be allowed outside ? ☐ Yes ☐ No   
Will you declaw your cat? ☐ Yes ☐ No

How will you keep your cat from escaping to the outside?

What methods will you use to prevent/limit your cat from clawing the furniture?

**YOUR HOUSEHOLD**

Please list all persons residing in the home, relationship, and age of children under 18 years of age?

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| **Name** | **Relationship** | **Age** | **Personality (e.g. outgoing, loud, quiet, shy)** |
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Does anyone in your household have allergies to animals? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does anyone in your household smoke? ☐ Yes ☐ No

How would you describe the activity level in your household?

☐ Busy – a lot of activity and a lot of guests coming in and out

☐ Moderate – occasional guests and children coming in and out

☐ Quiet – very few guests quiet household

What kind of activities does your family enjoy?

Are all members of your household in agreement with and supportive of the decision to adopt a cat?

☐ Yes ☐ No

**CURRENT & PAST PETS**

Please list all pets **currently** in your household

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| --- | --- | --- | --- | --- | --- |
| **Name** | **Breed** | **Gender** | **Age** | **Temperament/Issues** | **Source** |
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Are all current pets spayed/neutered and current on vaccinations? ☐ Yes ☐ No

If no, please explain:

Are your pets up to date on vaccinations? ☐ Yes ☐ No

If no, please explain:

Do any of your current pets have medical conditions? ☐ Yes ☐ No

If yes, Please explain:

How will you exercise your cat?

Have you owned other pets as an adult, **besides those currently residing within your household**?

If so, please provide their names, breed, and indicate what happened to them?

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| **Name** | **Type / Breed** | **What Happened to this Pet?** |
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**ADOPTING A CAT FROM B.A.A.R.K.**

How did you hear about B.A.A.R.K.?

Who will be providing the majority of care for your new cat?

What type of cat are you interested in adopting?

Age

☐ Kitten ☐ Young (1 - 4 yrs) ☐ Adult (5 - 8 yrs) ☐ Senior ☐ Any Age

Gender

☐ Male ☐ Female ☐ No preference

Would your new cat be regularly exposed to any of the following? Please check all that apply

☐ Children (under 10) ☐ Teens ☐ Other Cats ☐ Dogs

☐ Cyclists ☐ Joggers ☐ Traffic (foot or auto)

What will you do with your cat when you travel ? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you willing to work with your cat so he/she develops good household habits?

☐ Yes ☐ No

What behaviors would you find difficult to handle and might cause you to return your dog to B.A.A.R.K.? (Please check all that apply.)

☐Destructive chewing ☐ Clawing furniture ☐Dominance

☐Stubbornness ☐Aggressive behavior ☐Overly energetic

☐Overly protective ☐Nervous/Shy behavior ☐ Litter box issues

What characteristics in a cat would not suite your household?

What behavior(s) would result in your returning your cat to B.A.A.R.K.?

Are you willing and confident you can provide your cat any needed medications? ☐ Yes ☐ No

What brand of food do you plan to feed your new cat?

(If suggestions are needed, please discuss with your B.A.A.R.K. representative)

How long do you feel your new cat should be given to adjust to your household?

Where will your new cat be kept/allowed access in your home during the day?

Where will your new cat sleep at night?   
Where will your new cat be kept when you are not at home?

How many hours each day will your new cat be left at home alone? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will all the members of the household be available for participation in the adoption process?

☐ Yes ☐ No

If not, please explain?

Are you willing to allow a B.A.A.R.K. Adoption Coordinator to visit your home for an interview with your family as well as to inspect the environment in which the new cat will live? ☐ Yes ☐ No

What is the name & phone number of your vet/animal care center?

Do you understand that the cats that we bring into our adoption program may be unpredictable and that we cannot guarantee that the cat may not become aggressive and not be perfect? ☐ Yes ☐ No

Are you willing to accept any “unknowns” as well as potential risks involved in adopting a cat and making him/her a lifetime family member? ☐ Yes ☐ No

**REFERENCES**

Please provide the name, phone number, and email for three personal references. These must be people who do not live with you and are not related to you, but are familiar with your household or animal care-giving skills. We suggest your pet sitter, neighbor, co-worker. Please indicate their relation to you.

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| --- | --- | --- | --- |
| **Name** | **Relationship** | **Phone Number** | **Email Address** |
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I confirm that all of the information provided on this application is true and correct. I understand that submission of this application does not automatically mean I will be approved as an adoptive home for B.A.A.R.K. Rescue. **B.A.A.R.K. reserves the right to reject any adoption applicant for any reason.**

Print Name:

Signature:

Date:

Accepted/reviewed by: Date: