



Adoption Application

Print clearly & legibly. Incomplete applications will not be processed.

Please complete all information requested.

PLEASE NOTE OUR ADOPTION SPECIALISTS AND CAREGIVERS ARE VOLUNTEERS, WE TRY TO PROCESS APPLICATIONS WITHIN 5 BUSINESS DAYS; OCCASSIONALLY IT TAKES A LITTLE LONGER.

Thank you for your interest in providing a lifelong home for one of our cats. The completion of this questionnaire is the first step toward what we hope will be many years of happiness for both you and our rescue cat. Once you have answered all the questions, one of our volunteers/staff will review your application and may have a few follow up questions to ask. Please note that we do not respond to incomplete applications.

Submitting an adoption application to Feline Community Network does not commit the applicant to that adoption nor guarantee adoption approval of the specified or any adoptable cat listed with Feline Community Network. We seek the best match of personality, temperament, and home environment for our cats and future adoptive families. We are looking out for the best interests of our cats. We realized that some outcomes may be disappointing, please understand that we want the best fit for our cats.

If your application is approved, you will be asked to sign a legally binding contract when adopting your cat. Our adoption fee covers several services including vaccinations and spay/neuter to provide you with a healthy pet. Once paperwork has been completed and the adoption fee is paid, you will be able to take your new companion home. **You do need to provide a carrier for transport.** We may contact you after the adoption to follow up and ensure your cat is settling in well.

Medical Needs	Average Vet Costs		FCN Adoption Fee	
	Male	Female	Adult	Kitten*
Sterilization	\$250-\$600	\$350-\$900	Altered prior to adoption	Altered prior to adoption
FelV/FIV Combo Test	\$100-\$140	\$100-\$140	All cats are tested prior to adoption	All cats are tested prior to adoption
Rabies Vaccine	\$30-\$50	\$30-\$50	Vaccinated prior to adoption	Vaccinated at 12 weeks
Distemper Series (FCRCP/RCCP) 2 for Adults/3 for Kittens	\$30-\$50	\$30-\$50	Vaccinated prior to adoption	Vaccinated prior to adoption
Office visit within 1 week upon entry and at adoption	\$68-\$140	\$68-\$140	Medical attention as needed	Medical attention as needed
Deworming (Possibly multiple treatments)	\$45-\$60	\$45-\$60	Dewormed as needed	Dewormed as needed
Nail Trim & Ear Cleaning	\$30-\$50	\$30-\$50	All cats receive prior to adoption	All cats receive prior to adoption
Flea Preventative	\$12-\$25	\$12-\$25	All cats receive prior to adoption	All cats receive prior to adoption
Total	\$553-\$1090	\$653-\$1390	Adult \$200 Two Adults \$300	Kittens \$200 Two Kittens \$300

We do not adopt kittens singly without another young and or playful dog or cat at home

Conditions of Application

- You must be at least 21 years of age to adopt.
- If you are renting, we will need a copy of your lease that shows that you are permitted to have a pet and have paid the required deposit.
- You must be able and willing to spend the time and money necessary to provide training, medical treatment and proper care for a cat.
- For the first 30 days, please keep cat separated and confined to one area; you should not expose them to other animals in the home until you bring the cat to your vet for an initial checkup; we require a 10-day health check.
- You must be willing to provide a life long commitment to the care and well being of your cat. If you cannot make a lifetime commitment (cats can live 15-20 years) to an FCN cat, please consider adoption from your local shelter whose policies are less stringent than ours.

By submitting this application to FCN, I agree that this application form becomes the property of FCN. I understand that submitted application will not be returned even in the event my application is not approved for adoption.

What is the name of the cat(s) you are interested in adopting? _____

Why are you interested in adopting this/these cats? _____

How did you hear about Feline Community Network? _____

Applicant Information				
Name of Applicant:			Date of Application:	
Street Address:			City/State/Zip	
Home Phone Number:	Work Phone Number:	Cell Phone Number:	E-Mail Address:	
<input type="checkbox"/> Ok to call	<input type="checkbox"/> Ok to call	<input type="checkbox"/> Ok to call		
Occupation/Employed at:			Work Hours/Days:	
Name of additional responsible adult(s) in household:		Occupation:	Phone Number:	

Does anyone in your household suffer from cat or dog allergies? Yes No Unknown

Is everyone in your household aware of and agreed upon adoption a cat? Yes No Not Yet

Do You?	Activity Level	Household has	You live with	Residence type
<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Military Housing <input type="checkbox"/> College Housing	<input type="checkbox"/> Quiet <input type="checkbox"/> Active <input type="checkbox"/> Hectic <input type="checkbox"/> Seldom Home	<input type="checkbox"/> Live alone <input type="checkbox"/> adults only <input type="checkbox"/> Family w/ children Ages of: _____ _____	<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Parents <input type="checkbox"/> Children <input type="checkbox"/> Significant other <input type="checkbox"/> Other pets <input type="checkbox"/> Roommates	<input type="checkbox"/> House <input type="checkbox"/> Condo <input type="checkbox"/> Apartment <input type="checkbox"/> Mobile home <input type="checkbox"/> Dormitory <input type="checkbox"/> Townhouse <input type="checkbox"/> Other

**Renters, please provide a copy of your lease that shows you are permitted to have a pet with a receipt that you have paid any required deposits.*

Describe what you are looking for in a cat:

Gender	Age	Coat	Other	Housing
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> No preference	<input type="checkbox"/> Kitten <input type="checkbox"/> Teen <input type="checkbox"/> Adult <input type="checkbox"/> Senior <input type="checkbox"/> No preference	<input type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long <input type="checkbox"/> No preference	<input type="checkbox"/> Declawed <input type="checkbox"/> Special Needs	<input type="checkbox"/> Indoor only <input type="checkbox"/> Outdoor only <input type="checkbox"/> Indoor/Outdoor

Describe the personality and characteristics you are looking for in a cat: *check all that apply*

<input type="checkbox"/> Playmate for existing cat	<input type="checkbox"/> Lap cat
<input type="checkbox"/> Wants to be the only cat	<input type="checkbox"/> Energetic/mischievous
<input type="checkbox"/> Good with young children	<input type="checkbox"/> Does well in a busy home
<input type="checkbox"/> Friendly with everyone	<input type="checkbox"/> Quiet/independent
<input type="checkbox"/> Laid back/easy going	<input type="checkbox"/> Talkative
<input type="checkbox"/> Likes to be picked up	<input type="checkbox"/> Sleeps with me

How frequently do you travel, either for business or pleasure? _____

What will you do with the cat while you are traveling? _____

How many hours per day will your cat be left alone? _____

Do you have a dog or cat door that leads outdoors? Yes No

What will you feed the cat? _____

Who will be responsible for feeding the cat? _____

Who will be responsible for cleaning the litter box? _____

Will you have the cat declawed? Yes No Undecided

Where will your cat live? Free access to house Outdoors Free access to outdoors In the barn
 Other _____

What pet behaviors would cause you to give up the cat?

Illness Scratching Hides for first week Litter box problems Biting Too active
 Growling Spraying Destructiveness Incompatibility to other pets
 Other: _____

What changes in your home would cause you to give up the cat?

Allergies Loss of job You become ill Moving Family member becomes ill Pregnancy/new baby

Have you ever adopted an animal before? Yes No If yes, from where? _____

Have you ever surrendered an animal before? No Yes, explain why? _____

Have you ever been cited or convicted of a crime relating to animal cruelty,

or do you have a pending charge? Yes No

I will allow an FCN representative to perform a pre-adoption home check? Yes No

I will allow an FCN representative to visit my home later to check on the animal(s) I am adopting? Yes No

I am aware that the adoption fee for the cat/kitten I am considering is non-refundable? Yes No

Please list the animals that have shared your home in the past 5-10 years:

Name	Breed	Sex	Age	Sterilized	Tested for		Indoor/Outdoor	Declawed	Still with you (if not, why?)
					FIV	FeLV			

What will you do if the cat doesn't get along with your current pet(s)? _____

How much do you think it costs, per year, to care for a cat? _____

What will you do if the cost exceeds this amount? _____

Do you know that the average cat can live to be 15-20+ years old? Yes No

Are you prepared financially to cover annual costs for updating shots and emergency care for your cat? Yes No

Veterinarian Information		
<i>Please note – we will be contacting your vet for reference; you need to call them to authorize the release of basic information.</i>		
Name of your Veterinarian		Name of clinic or Hospital
City	State	Phone number
Please list any other vet/vet hospitals, 24-hour emergency care or vaccine clinics that you have used for your current or recently deceased pets:		

We do not guarantee the health of any animals offered for adoption. Any time you adopt an animal, you should take it to a licensed veterinarian as soon as possible. Your animal is, to the best of our knowledge, healthy but will need to be started immediately on a program of preventative veterinary care. Please be aware that the animals available for adoption are rescue animals and as such, have often been exposed to a variety of diseases. Like human illnesses, these disorders can have an incubation period of up to several weeks. If the animal you adopt shows signs of illness at any point, you must take it promptly to your veterinarian for treatment at your expense.

I have read and understood this disclaimer. _____ initial here

By signing this application, I acknowledge that I have answered all questions truthfully. Failure to provide truthful answers can result in the forfeiture of your adopted pet by the Feline Community Network Team.

Signature

Date