



FOSTER TO ADOPT APPLICATION

TODAY'S DATE: _____

Contact Information

Name: _____ Co-Applicant Name: _____

Relationship to Co-Applicant: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Employer: _____ Occupation: _____

Family Information

Are you or the Co-Applicant a student? _____

No. of adults in household? _____ Ages? _____

No. of children in household? _____ Ages? _____

Do they share your interest in adopting? _____ Anyone allergic to cats? _____

Who will be responsible for the cat's care? _____

If something should happen to the person responsible for the cat's care and they are no longer able to provide that service is there a person who would take over those responsibilities (please include this person as one of your reference checks)? _____

Home Information

Where do you live? Apartment Condo Farm Mobile home Townhouse House

Do you own or rent your home? _____ How long have you lived at your current address? _____

If you rent, landlord's name & phone #: _____

Do you have the permission of your landlord to have a cat? _____ Is a pet deposit required? _____

Pet Information

Have you ever had a pet before? Yes No

Have you ever adopted an animal from a rescue/animal control agency? Yes No

If yes what shelter /rescue group: _____

Have you ever had an application rejected for adoption of an animal from a rescue/animal control facility? Yes No If yes, explain: _____

Please list those pets you no longer care for – Use back of paper if need more room to write.

Name	Age	Species(dog/cat),	Gender	Breed

Please list your current pet(s) – Use back of paper if you need more room to write.

Name	Age	Species(dog/cat),	Gender	Breed

Name of your current veterinarian: _____

Their address & phone number: _____

Are your pets': vaccinations up to date? Yes No Flea preventive treatment? Yes No

Have your cats been tested for feline leukemia and FIV? _____ Results: _____

Foster to Adopt Cat Information

Why do you want to FOSTER TO ADOPT a cat? _____

Name of cat you are interested in: _____

Are you willing to transport the cat for any necessary veterinary care? Yes No

(Note: Wild About Cats of Cumberland County covers the medical expenses for all foster animals. However, you must contact our Foster/Adoption coordinator before taking the cat to the vet. With the obvious exception of a life threatening medical emergency, if you should decide to take your foster animal to a different vet for convenience or any other reason, without contacting Foster/Adoption coordinator Wild About Cats of Cumberland County will not be able to cover the cost of the visit. Thank you for your understanding.)

For whom are you fostering to adopt the cat? Self Gift

Who will be responsible for the cat's care? _____

If something should happen to the person responsible for the cat's care and they are no longer able to provide that service is there a person who would take over those responsibilities (please include this person as one of your reference checks)? _____

Our cats are indoor only cats if you want to take them outdoors they must be harness and leash trained; wear their collar with tags and be microchipped. Do you agree with this? Yes No

Will anyone be home during the day? Yes No

How many hours will the cat be left unattended? _____

Please describe where the cat will stay during the day, at night, & when you aren't home: _____

If you move, what will you do with the cat? _____

Are you financially able and willing to provide annual checkups, vaccinations, and ANY medical care necessary? Yes No

We do not allow our adopted cats to be declawed. Are you willing to provide them Humane Alternatives to Declawing? Yes No Not sure

Do your current pets get along with other cats? _____ If you think there may be a conflict, please describe how you will keep the foster cat separate from your family pet(s)

What precautions would you take to properly introduce a new cat into your home if you have other animals (a dog, bird, rabbit, another cat, etc.)? _____

What will you do if your new cat does not get along with your present companion animals?

Are you familiar with your local animal control laws? Yes No

Are you willing to sign legal pet adoption papers? Yes No

Do you agree to permit a visit to your home/farm by appointment? Yes No

Foster Care to Adopt Agreement

I/we understand that all animals are TEMPORARILY fostered for Wild About Cats of Cumberland County and are the property of Wild About Cats of Cumberland County. I agree to keep any foster animal under my control at all times while I am fostering, keeping cats inside and safe. If my foster pet(s) shows any sign of health or behavior problems, I understand that I need to contact Wild about Cats Foster/Adoption coordinator immediately. I will relinquish any foster animal to Wild About Cats of Cumberland County upon their request. Wild About Cats of Cumberland County is not responsible for damage or injury to any person, animal, or possession caused by a foster animal. By signing below, you are verifying that you have read and agree to all terms stated above. I/we attest that the information provided on this form is true and accurate to the best of my/our knowledge.

Foster to Adopt Donation Amount: The foster to adopt donation amount is \$125 for one (1) cat and \$100 for each additional cat. The amount due at signing is \$75 for one (1) cat plus \$50 for each additional cat.

Since you have expressed interest in fostering to adopt as part of the process references are required.

References

(Be sure to ask your reference before listing them so they will be alerted to our contacting them.)

Please provide the name of a friend or relative who would take care of your cat should any major life change affect your ability to do so.

Name: _____

Text, phone or email: _____

Please provide additional references: 1 family member and/or coworker(s) or friend(s).

Name: _____

Text, phone or email: _____

Name: _____

Text, phone or email: _____

By signing this form, I/we acknowledge that all information on this form is true and correct. I/we understand that any misrepresentation of fact may result in WACCC refusing adoption privileges to me/us. If my/our request for adoption is approved and later WACCC discovers the above information is not true or correct, WACCC reserves the right to remove the adopted cat from my home/farm.

Signature _____ Date _____

Return this form to wildaboutcatsCC@gmail.com

For WACCC Use Only:

WACCC Name Printed: _____ Signature: _____

Email: __wildaboutcatscc@gmail.com Phone: __931-337-0853

Cash Amount \$ _____ Date Received by WACCC _____

Check Number _____ Date on Check _____ Amount \$ _____ Date Received by WACCC _____