

Oswego County SPCA
P.O. Box 442
Fulton, NY 13069
315-592-5551

CAT ADOPTION APPLICATION

(Oswego County SPCA has the right to refuse adoption to anyone.)

Applicant Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____ Work _____

Employer/Income Source _____

May we contact you at work? Yes _____ No _____

E-mail Address _____

RESIDENCE INFORMATION

Do you own? _____ Rent? _____

Type of home (circle one): House Apartment Student Housing Mobile Home

If you rent, who is your landlord? _____

Landlord phone number _____

How many residents live in your household? Adults _____ Children _____

Ages of children? _____

Have you adopted from any agency/league/shelter before? Yes _____ No _____

If yes, which one? _____

Do you still have this pet? _____ If not, please explain: _____

CURRENT PET INFORMATION

Type of animal and name Gender Age Years Owned S/N?

PREVIOUS PET INFORMATION

Type of animal and name Gender Age Years Owned S/N? What happened to pet?

Who is your veterinarian? _____

Veterinarian's phone number _____

This cat will be (circle): Indoor only Outdoor only Indoor/Outdoor Declawed

Who will be responsible for this cat? _____

Thinking into the future, will you be able to provide the necessary medical testing and treatment for this cat if needed? _____

Reason for wanting this cat: _____

If you have younger children, they would need to be educated on how to interact with this cat in order to prevent bites, scratches and also possible harm to the cat. Are you willing to do this?
Yes _____ No _____

How long will you give this cat to adjust to its new environment? _____

How many hours will this cat spend alone? _____

What will you do if this cat shows destructive behavior? _____

I certify that the above is true and that false information may result in nullifying this adoption. Oswego County SPCA has the right to refuse adoption to anyone. I understand that no animal can be held for me.

Signature _____ Date _____