



Helping homeless and abused cats

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information@furryfriendswa.org
www.furryfriendswa.org

Tax ID 91-2002817

Adoption Application

Cats Name: _____ Description of the cat: _____

PERSONAL INFORMATION

Name: _____ Phone: _____ Alt. Phone: _____

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

Email Address: _____ Employer: _____

If Renting:

Landlord Name: _____ Contact Number: _____

Email Address: _____

REFERENCES (PLEASE PROVIDE THREE)

Name: _____ Relationship: _____

Contact Number: _____ Email: _____

Name: _____ Relationship: _____

Contact Number: _____ Email: _____

Name: _____ Relationship: _____

Contact Number: _____ Email: _____

FAMILY INFORMATION

How many members are in your direct family? _____ Number of Adults: _____

Number of Children: _____ Ages of Children: _____

Are there any family members with allergies? _____

INFORMATION ABOUT YOUR PETS

How many pets do you currently have? _____ Species: _____

Ages of Pets: _____

Are their vaccines current? _____ Spayed / Neutered: _____

Indoor: _____ Outdoor: _____ Indoor / Outdoor: _____ Do you have a pet door? _____

How many hours on average per day is your pet without human companionship? _____

How many hours per day does your pet spend outdoors? _____

Have you had pets in the past: _____

Where are they now? _____

Name of your vet: _____ Contact Number: _____

(By my signature below I authorize veterinarian(s) to release information about my pets to Furry Friends)

MISCELLANEOUS QUESTIONS

Have you requested a cat/kitten be declawed (tendonectomy) in the past? _____

Is declawing a consideration for this cat? _____ If yes, please explain: _____

How do you plan to help this cat adjust to their new home and family? _____

Why are you interested in adopting this cat? _____

ADOPTION CONDITIONS

Upon approval of adoption, I do hereby agree to all of the following:

1. To keep all cats indoors or in a harness and leash when outside.
2. If renting, to provide proof cats are allowed and deposits paid.
3. To be available for home inspection by a Furry Friends representative.
4. To NOT declaw or have a tendonectomy performed.
5. To provide nutritious food, fresh water, shelter and kind treatment at all times.
6. To provide veterinary care to ensure good health and as needed for illness or injury.
7. To notify Furry Friends of developing behavior issues and be willing to work to resolve them
8. To use appropriate pet carrier for transportation.

ADOPTION IS A LIFETIME COMMITMENT

Furry Friends is an all-volunteer, non-profit 501c3 organization that operates solely on donations. Donations are tax deductible as the law allows and covers only a portion of the expense of diagnostic testing (FIV/FELV) vaccines, food, shelter, and other medical needs.

The suggested donation for cat/kitten, is \$80 for one, \$100 for two, if adopted at the same time.

Persons at least 60 years of age who adopt a cat 3 years or older will receive a senior rate of \$60 for one, \$80 for two, if adopted at the same time.

No cash refunds will be given for the return of a Furry Friends cat. However, under certain circumstances, a credit will be given towards another Furry Friends cat.

WE RESERVE THE RIGHT TO REFUSE AN ADOPTION AT ANY TIME

ADOPTER (OVER 18 YEARS OF AGE)

The information on this application is correct and accurate to the best of my knowledge.

Signed _____ Date _____
Signature of Adopter

Accepted by _____ Date _____
FURRY FRIENDS Volunteer Member

FOR OFFICE USE ONLY

References Checked: 1) _____ 2) _____ 3) _____

Copy of Pet Deposit Receipt (if renting): _____

Adoption Conditions: _____

Adoption Donation Collected: _____

Comments: _____