

LAST HOPE, INC.
Animal Rescue & Rehabilitation
P.O. Box 7025, Wantagh, NY 11793
631-425-1884 www.lasthopeanimalrescue.org

Adoption Location: <u>Wantagh</u>
Date Faxed _____ Time Faxed _____
Name & phone # of volunteer who took the application: _____
FAX APPLICATION TO: 516-388-7969

APPLICATION FOR CAT/KITTEN ADOPTION
Non-refundable adoption fee: \$150 per kitten, kitten pair \$250; 3-8yrs \$125; 8+ yrs \$75

Thank you for considering a LAST HOPE animal for adoption. LAST HOPE would like to place each of its animals in the most appropriate home, and therefore would like you to fill out this application. You must be at least 25 years old with current ID showing name, address & telephone. If you are living with your parents, one of them must co-sign the final Adoption Agreement.

Date: _____	Where did you hear about Last Hope? _____
Name: _____	Home Phone: _____
Address: _____ Apt # _____	Cell Phone: _____
	Email: _____
Employer: _____	Work Phone: _____
Your Date of Birth _____	Driver's License # _____
Do you own or rent _____	How many rooms? _____ Are there screens on all your windows? _____
If you rent, who is your landlord? _____	Phone #: _____

Family/Household Information

Marital Status: Single Married Do you drive? Yes No

Check all that live in your household: Adults over 21 -- How many? _____ Senior Parent Relative Roommate

Have all the adults in the household agreed to this adoption? Yes No

Number of children in household: _____ Ages of children: _____

Have the children had pets before? _____

Which cat do you wish to adopt?

1st Choice: _____ LH Sponsor: _____ Foster: _____

2nd Choice: _____ LH Sponsor: _____ Foster: _____

Would you consider adopting a pair? Yes No Maybe

Pet Information

Please tell us about your present pets: Check here if you have never had a pet

Cat(s) – How many? _____ Dog(s) – How many? _____ Other pets – please specify _____

Why do you want a cat? Companionship For a child As a mouser Other _____

Is the cat for Yourself or A gift (if so, for whom? _____) Is it a surprise? Yes No

Where will your adopted cat live? Indoors Outdoors Both

Are you willing to have a litter pan in your home? Yes No Do you own a pet carrier? Yes No

Are you aware that the average house cat's life expectancy is 15-19 years? Yes No

Have you ever had a pet before? _____ Is the pet still living with you? Yes No

Are your animals current on all vaccinations (rabies and distemper vaccines)? Yes No

Are any of your cats declawed? Yes No

Do you have the finances to provide daily food, yearly and emergency vet care? Yes No

Who will be the primary caretaker of your new cat? _____

How many hours a day will you cat be home alone? _____ Where will he be left? _____

Are you considering having your new cat declawed? Yes No

Are there any bad habits that you will not tolerate from a cat? _____

Cats need preparation training for life changes such as having a baby, divorce, etc. Are you committed to working through these changes if they occur? _____

If you have to move, what do you plan to do with your pet(s)? _____

How will you care for your cat when you go away for a vacation? _____

If you were no longer able to care and provide for your cat, who would assume this responsibility?

Name _____ Phone Number _____

Have you ever given an animal away or relinquished an animal to a shelter? _____

If yes, what were the circumstances? _____

Anything additional you can tell us about yourself in relation to this adoption? _____

Current/Past Pets(Owned in the past 10 years)

Breed	Name	Sex	Age	Spayed / Neutered (yes/no)	How long have you had this pet?	Where does this pet spend most of its time?	Do you still have this pet? If not, please explain

Veterinarian's name: _____ Phone #: _____

Address: _____

Whose name are the pets listed under at your vet? _____

1st Personal reference (Other than relative) _____ Phone #: _____

Address: _____ Relation: _____

2nd Personal reference (Other than relative) _____ Phone #: _____

Address: _____ Relation: _____

I understand that the information I have provided will be verified before I am approved to adopt. Falsification or omission of any of the requested information will result in refusal of adoption.

Signature of Applicant: _____ Date: _____

Last Hope, Inc. is a not-for-profit organization staffed entirely by volunteers who are committed to serving the best interest of the animals in its care. We therefore, reserve the right to select the home that best meets the needs of each animal up for adoption. Thank you for considering a Last Hope cat for adoption.

Please note that the adoption donation fee for your cat helps to support the food, medical treatment, spay/neuter, behavior training, and processing expenses incurred in sheltering, caring for and preparing cats and kittens for adoption. Last Hope, Inc. does not sell animals.