## For The Love Of Paws Senior Pet Sanctuary Inc

D.B.A. Paws Meals On Wheels, Space Coast Kibble Kitchen 12198 County Road 512 ● Fellsmere, Florida 32948 772-539-2417 ● www.pawspetsanctuary.org



## CAT ADOPTION/FOSTER APPLICATION

First Name:		Last Name:_		
			State:_	Zip:
Email:		-		·
Who will be the primary care	egiver of the cat(s)?			
Reason for wanting a cat(s)?	□ Companion □ Mouser □	For children Gift	□ Breeding	
If employed please list empl	oyer:			
Number of people in househ	old: List ages of all li	iving in household:		
I live in a: □ House □ Cond	o □ Apartment □ RV/Mobil	e Home 🗆 Manufactu	red Home	
Do you rent or own your hor	ne? □ Rent □ Own □ Live i	n Relative/Friend's Ho	me	
*If you rent you must notify	your landlord that you have p	provided us with their	contact information & that we	may contact them to verify
you are allowed to own a cat	(unfortunately, we must do this	due to past experience).		
Where will your cat(s) prima	rily live? □ Indoor only □ In	ndoor/Outdoor □ Out	door only	
Do you have an enclosed lan	ai or patio? □ No □ Yes			
Where will your cat(s) sleep	at night?			
What would you do if your c	at stopped using the litter bo	ox?		
(Can use back of form)				
Under what circumstances w	ould you return a cat(s)?			
(Can use back of form)				
Please list any pets you have	owned in the last 5 years (in	clude breed, sex, age,	spayed/neutered & number of	f years owned):
BREED:	SEX:	AGE:	SPAYED or NEUTERED:	# YEARS OWNED:
1	1			1

<b>Vet reference</b> (pease call your vet and give permission to release information	to us):
Veterinarian Name:	
Address:	
Phone:	
<b>Two Personal References</b> (People who know you, but are not related to you.  Name:	, 0
Address:	_
Name:Address:	Email:
Phone:	
Relation to you:	
Our goal is to place all pets into homes that will best suit their individual needs I understand that many factors determine which applicant will be no chosen to adopt a pet, it does not mean that I am not considered a good be accepted in the future if I match with another pets needs/character.	natched with a particular pet. I also understand that if I am not od pet owner or that my home is not acceptable. I understand I may
Please sign here:	
Today's Date:	
Cat Adoption Form Revised: October 2024	