



**LANCS EAST BRANCH**

**CAT ADOPTION**

This questionnaire must be filled in and be checked by a member of staff before a cat can be reserved, or considered for adoption.

Our main concern at the Altham R.S.P.C.A. is that the animals go to permanent new homes where they will be well cared for, for the rest of their lives. All the animals living at the Centre are here because their owners could no longer care for them. Our first duty is to the animals and we try to ensure the animal concerned is compatible with the people wishing to adopt.

**PLEASE NOTE THE ANIMAL FOR ADOPTION IS THE PROPERTY OF THE R.S.P.C.A. ALTHAM BRANCH AND IS REHOMED AT OUR DISCRETION.**

Interviewer \_\_\_\_\_ Date \_\_\_\_\_  
 Name of applicant \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_ Post code \_\_\_\_\_  
 Tel. No. \_\_\_\_\_ Work No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

**PLEASE DELETE AS APPROPRIATE**

Why do you want a cat? \_\_\_\_\_

Is the above address a house / flat (if flat what floor is it on) / mobile home / other \_\_\_\_\_

Is the property private rented / council / your own

Are you considering moving in the near future YES / NO

If yes, how soon \_\_\_\_\_

Are you planning a holiday in the near future YES / NO

If yes, on what date are you going \_\_\_\_\_

**Have you thought about the cost of boarding?**

How many people live in your household - Adults \_\_\_\_\_ Children \_\_\_\_\_

Please specify ages of children \_\_\_\_\_

Does anyone in your household suffer from allergies to animals e.g. asthma YES / NO

**Has the family discussed the implications of having a pet and the restrictions it may place on their lifestyle?**

**Do the prospective owners both work YES / NO. Does only one person work YES / NO**

**What hours are worked. Do you come home for lunch YES / NO**

Owner 1) Time you leave for work \_\_\_\_\_ Time you arrive home \_\_\_\_\_

Owner 2) Time you leave for work \_\_\_\_\_ Time you arrive home \_\_\_\_\_

How long will the animal be left alone each day \_\_\_\_\_ (number of hours in total)

Will the cat be an indoor cat / outdoor cat / both

Have you owned a cat before YES / NO If yes what happened to the cat \_\_\_\_\_

Are there any other pets in the household at present YES / NO

If yes please specify \_\_\_\_\_

Where applicable are your other pets vaccinated YES / NO

Where applicable are your other pets neutered YES / NO

Which Veterinary Practice will you be using \_\_\_\_\_

Are you aware of the costs involved in keeping an animal i.e. vaccinations, worming, feeding, flea control and other veterinary consultations and treatments YES / NO

**PLEASE ASK ABOUT THE 6 WEEKS FREE PET INSURANCE AVAILABLE ON ADOPTION OF A CAT**

If for a retired or elderly person has thought been given to the possibility of the cat outliving them and what the implications are YES / NO

**Do you fully understand a rescue animal may take some time to settle and will need a lot of patience, understanding and love. Also a place of his / her own where they can lie quietly and sleep.**

Are you aware that one of our home visitors may need to visit your home YES / NO

**PLEASE NOTE THE MANAGEMENT HAS THE RIGHT TO REFUSE IF IT IS FELT THE ANIMAL IS NOT SUITABLE FOR THE APPLICANT/S.**

**The information I have given on this form is true. I understand that any false information will invalidate this application and will result in the R.S.P.C.A. refusing this application. Applicants must be 18 years and over.**

Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

**Thank you for your co-operation in completing this form**

**We would like to keep you up to date with the work of our Branch of the R.S.P.C.A. If you do not wish to receive any information please tick this box**

**FOR OFFICE USE ONLY**

Name of cat \_\_\_\_\_ UW \_\_\_\_\_ Age \_\_\_\_\_

Breed \_\_\_\_\_ Size \_\_\_\_\_ Colour \_\_\_\_\_

Sex \_\_\_\_\_ Neutered / Spayed YES / NO

Landlords letter received YES / NO / NOT APPLICABLE. Date on file \_\_\_\_\_

Any other comments :

Interviewer's signature \_\_\_\_\_ Date \_\_\_\_\_

Management approval \_\_\_\_\_ Date \_\_\_\_\_

Passed to home visitor \_\_\_\_\_ Date \_\_\_\_\_

Home Visitors comments and recommendations

\_\_\_\_\_

\_\_\_\_\_