

# The Humane Society for Inland Mendocino County

9700 Uva Drive, Redwood Valley, CA 95470 (707) 485-0123

## Cat Adoption Application

Name of Cat: \_\_\_\_\_ ID# \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE FILL OUT THIS FORM AS ACCURATELY AND COMPLETELY AS POSSIBLE

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ e-mail: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

1. Do you **RENT** or **OWN** your home? \_\_\_\_\_ If you rent, we must have permission from your landlord stating you have permission to have this animal at your residence. Please provide the name and phone number of your landlord: \_\_\_\_\_
2. Why do you want this cat? \_\_\_\_\_
3. Have you owned a cat before? **Y N**
4. Where will the cat be staying? Indoors Only \_\_\_\_\_ Outdoors Only \_\_\_\_\_ Indoor/Outdoor \_\_\_\_\_
5. Do all members of the household want this cat? **Y N**
6. Who will be the primary caregiver? \_\_\_\_\_
7. Will you provide medical care and treatment as necessary? **Y N**
8. Will you confine this cat for a reasonable amount of time (approx. 30 days) so it can adjust to its new environment? **Y N**
9. How many other animals do you have? Cats \_\_\_\_\_ Dogs \_\_\_\_\_ Other \_\_\_\_\_
10. Have you ever had to give up an animal? **Y N** If so, why and where did it go? \_\_\_\_\_  
\_\_\_\_\_
11. If you had to give up this cat what would you do? \_\_\_\_\_
12. By adopting this cat, you are taking on the responsibility for its life. You may be sharing your life with this cat for up to 20 years. Cats depend upon their human companions for food, water, shelter, cleaning, companionship, and medical care. Are you willing and able to make this physical and financial life-long commitment? **Y N**

I certify that the above information is true and correct. I understand that false information may void this application. I hereby accept possession and title of this cat "AS IS" and at my own risk. I release and waive any rights against The HSMC, which I may have now or in the future for any damages to persons or property caused by this cat.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

HSIMC Rep: \_\_\_\_\_

Paid by: **CASH** \_\_\_\_\_ **CHECK** \_\_\_\_\_ **CREDIT CARD** \_\_\_\_\_ **AMOUNT \$** \_\_\_\_\_

Humane Society for Inland Mendocino County  
**CAT ADOPTION CONTRACT**

**CAT'S NAME** \_\_\_\_\_ **ID#** \_\_\_\_\_

Description \_\_\_\_\_

Name of Adopter \_\_\_\_\_

Address \_\_\_\_\_

Phone #s \_\_\_\_\_

***As the adopting party, I agree to the following provisions:***

1. I acknowledge that cats and kittens are usually playful and will race around rooms and climb on furniture. I will provide appropriate scratching posts and toys for the cat and encourage it in a humane manner to not be destructive.
2. I will house this cat in a safe location with food, bedding and water. I will keep the cat confined indoors for up to one month so it will adjust to its new home.
3. I will provide appropriate veterinarian care and treatment for this cat and seek care for it in case of injury or illness. I will not allow to let this cat suffer unnecessarily.
4. If any behavioral problems develop I will seek guidance from a qualified person as to how to correct the problem.
5. I agree to not abuse, harm or neglect this cat. I authorize the HSIMC at their sole discretion to determine whether the cat has been abused or neglected.
6. If for any reason I cannot keep this cat after adoption is final, I will notify HSIMC. I will find a suitable home or placement for this cat. I understand that the HSIMC most likely will not be able to take the cat back into the Shelter. Although, if HSIMC does take the cat back after the adoption is final, there will be no refunds and a surrender fee may be required.
7. I understand that failure to perform the forgoing agreement will constitute a breach of contract. In the event of any breach of contract, I authorize the HSIMC to reclaim both possession and ownership of the cat at no cost.
8. I understand that the cat covered by these adoption papers, is as far as can be determined by HSIMC, in good health. HSIMC will not be responsible for any medical costs after the adoption is final. I understand that I will be informed by HSIMC prior to adoption of any known past or present medical/behavioral conditions and I accept the cat 'AS IS'. *I understand the seven day home visit agreement is separate from this agreement.*
9. I agree to give HSIMC visitation rights to ensure that the terms of the adoption agreement are met.

Adopter Signature \_\_\_\_\_ Date \_\_\_\_\_

HSIMC Rep \_\_\_\_\_

# Disclaimer

The Humane Society for Inland Mendocino County tries its best to have healthy animals available for adoption, however, due to being in a shelter environment many of the animals we take in have been exposed to typical dog and cat illnesses prior to our care. The most common problems we encounter are: Ringworm, Upper Respiratory (cold), Kennel Cough (in dogs), worms, Parvovirus (in dogs), and Giardia or Coccidiosis (diarrhea). We do our best to monitor every animal for health problems or illnesses while in our care and provide adopters with healthy animals, but some of these illnesses may go undetected at the time of adoption due to various incubation periods.

Symptoms of Ringworm: patches of missing fur or dry spots, especially around the face and paws

Symptoms of Upper Respiratory: sneezing and weepy eyes

Symptoms of Kennel Cough: persistent coughing

Symptoms of Parvovirus: listlessness, throwing up, diarrhea, and blood in the stool

If you see any of these signs you should call a veterinarian right away. Many of these are not life threatening and can be taken care of easily with the right medication. However, Parvovirus is often deadly, especially for puppies, if the dog is not taken to a veterinarian for treatment right away. Once you have taken care of your animal's medical needs we ask that you notify the Humane Society of your animal's illness so that we can notify other adopters and monitor the animals in our care for the illness.

All adopted animals from the Humane Society for Inland Mendocino County are on a seven day trial visit. If, for any reason, you want to return the animal during this seven day period you may do so, however we ask that you notify the shelter before you bring the animal in so that we have time to prepare proper housing accommodations for the animal. Your adoption fee will be returned, by check within two weeks of the Humane Society receiving a signed surrender form relinquishing the animal to the Humane Society. During your seven day trial period, if you chose to go to the veterinarian it will be at your own expense, we do provide adopters with a free "Well Pet Exam", but anything that you elect to do with the animal at the visit will not be covered by the Humane Society, unless the Humane Society has given written consent ahead of time.

We are truly sorry if any inconveniences develop and will do our best to work with you in the event of any problems occurring. Please keep in mind that we are a volunteer based organization and we do our best to properly care for our animals. Thank you for your understanding and thank you for adopting an animal from the Humane Society for Inland Mendocino County.

I have read and understood the above information.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

HSIMC Rep: \_\_\_\_\_