



PALS ANIMAL RESCUE, INC . CAT ADOPTION APPLICATION

Name _____ Age _____ Date _____
 Address _____ City _____ Zip _____
 Home ph. _____ Work ph. _____ Place of Employment _____ Cell _____
 Are you the head of household? Yes No : Do you live with your parents? Yes No : Who will pet be for? _____

If for yourself, list spouse or other adult names in home _____
 Do you have any children/grand children in home or visiting? If so, list ages _____
 Does anyone in your home have allergies or asthma? Yes No Do you live in: Apt. Duplex Mobile home House Other _____
 Do you: Own Rent If rent, name of landlord _____ Phone _____
Will this cat be an: indoor only cat outside only cat inside/outside cat barn cat mouser

PLEASE LIST PRESENT PETS

Kind	Name	M/F	Spay/Neuter	Age	Where kept	How long owned

LIST PAST PETS OWNED WITHIN LAST 10 YEARS

Kind	Name	M/F	Spay/Neuter	Age	Where kept	What happened to it	When

Who is your veterinarian? _____ Phone # _____
 How long have you used this vet? _____ On which animals _____

CATS INTERESTED IN _____

Vet check _____	LL check _____
Approved _____	By _____
N/A/why _____	

I give my permission for PALS Animal Rescue to review my pet care history with my veterinarian.

 Signature Date

 Drivers License #