

Date of Application:	
Name of cat/kitten:	

Application to Adopt a Cat / Kitten
Please complete this form, sign and date it and return by email to alleycatsalliance@gmail.com

Your Name:							
Physical Address	::						
Mailing Address:							
City/Town:		Province:		Postal Code:			
Email Address:				·			
Phone Number :	H.		C-1			C-2	
Living Arrangement: ☐ Married ☐ Single ☐ Cohabitate ☐ Roommate(s)						nate(s)	
Are you currently	Are you currently employed? Your age?						
Are you a Studer	it? Yes/No	If yes, Ho	ow many years	is your p	rograr	n in Kelow	/na?
Are you're a pern	nanent resident o	f Kelowna?	Yes/No				
If no, what City, Provence or Country are you visiting from?							
What will you do with your cat/kitten when you return home for an extended visit?							
Type of residence	e: □House	□ Apartm	nent/Condo	□ Base	ement	Suite	□ Other
Do you: □Own	you: □Own □Rent □Share Accommodation						
Are Pets accepted by your Landlord? Yes / No Name & Phone of Landlord							
Do you have child	dren? Yes / No	If yes, v	what are their a	ges:			
Do any family me	embers have pet a	allergies? Y	es / No If ye	s, explair	1		
Do you have a ca Which?	at(s)	_, dog(s)	now	? Have	you ha	ad a cat or	dog before?

If yes, did you have the cat(s) and/or dog(s) spayed or neutered and vaccinated?						
Who is your veterinarian? kitten/cat? Yes/No	·					
How much do you think it will cost per year to look after your cat/kitten?						
Do you plan to keep your new cat strictly indoors or will he/she have outdoor privileges?						
If your previous cat(s) has passed away, please describe the circumstances:						
If your previous cat(s) had to be re	-homed, please describe the circu	mstances:				
How many hours are you away from home during the day?						
What are your reasons for adoptin	g?					
What are you looking for in a kitten/cat?						
Any particular colour?	M/F?	Long/Short Fur?				
Would you consider two cats? Yes / No We often have very attached pairs to place.						
How often do you travel?						
Who will care for your kitten/cat wh	nile you are away?					
Will you provide a scratch post for your cat?						
Two References: (Include phone	numbers and relationship)					
1.						
2.						
Can you help by volunteering? Ye	es / No	ostering				
BY SIGNING BELOW I DECLARE ALL ABOVE INFORMATION TO BE TRUE TO THE BEST OF MY KNOWLEDGE.						
Signed:	Date:_					

Please complete this form, sign and date it and email it to alleycatsalliance@gmail.com.

We endeavor to respond to all enquiries as quickly as possible. If you are not contacted by an AlleyCATs Alliance representative within 72 hours of submitting this form, please phone 250-462 8195. Thanks!