Animal Name:	
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HSNI	City	



Cat Adoption Form

HUMANE SOCIETY OF NORTH IOWA 2700 South Birch Drive Mason City, IA 50401 641-423-6241



At the Humane Society of North Iowa, we seek responsible homes for our animals, where owners fulfill the physical needs, veterinary needs, safety and emotional needs of their pets. Our adoptive dogs and cats must not become free-roaming nuisances. To these ends, the Humane Society reserves the right to refuse any Adoption Application.

Adopters must be at least 18 years old. All adults in the household must participate in this application and selection process. We may require a valid form of identification bearing the applicant's current address. Renters must supply their landowner's name and phone number. Veterinary care and housing arrangements for applicants' current pets must meet HSNI standards.

By signing this application, the applicant gives express permission for the HSNI to investigate all statements made on this application. Specifically, the applicant gives the HSNI permission to inquire of and obtain veterinary care records for the applicant's current of past pets. Also, for applicants who rent their dwelling or trailer lot, the Humane Society will contact the current landowner to confirm permission for applicant to house a cat on the property as an indoor pet.

Name (include spouse)			
Street address			
Mailing address			
City	State	Zip Code	
Home phone number:	Email Address		
Are you at least 18 years old? Do	you attend school?		
Place of Employment	Work Number_		_How Long?
Spouse's place of Employment	Work Number	·	How Long?
Do you live in a: House Apartment _	Condo	Dorm	_ With parents
Mobile Home Farm OTHER	(describe)		
I RENT I OWN			
Landowner's name	Landowner's Address		
City State	_ Zip Code Phone	Number	

1. Have you ever adopted a pet from a shelter before? What shelter?				
2. Have you ever been refused adoption of a pet from a shelter? If so, why?				
Please provide the following information about your household:				
5. Number of adults Number of children Ages of children				
6. Which member of your household will hold primary responsibility for the feeding of your new pet?				
7. Who will train and supervise your cat? (litter box/outdoor exercise)				
8. Are any members of your household allergic to animals? No Yes If so, explain				
9. Please tell us why you want to adopt this animal. Check all that apply: Gift Mouser				
Companion to another animal For a child Companion for myself				
How will you train your cat to? 10. Stay off furniture / tables / counters?				
11. Not chew plants?				
12. Not scratch furniture?				
13. If you move in the future, what will you do with your pet(s)				
14. What type of cat are you looking for?SizeSex Breed				
 15. a. Are you aware that, in the first year, regular preventative medical attention may cost \$150 to \$200? b. Are you aware that, in the first year, food, pet supplies, and training may cost \$100 to \$150? 16. This cat will be without human companionship for about hours per day, days per week. 				
17. What arrangements will you make for your pet(s) when you leave town for extended periods (vacations, etc)?				
18. Where will this cat be kept during the day? during the night?				
19. Do you understand the state laws/local ordinances that require vaccinating, leashing and licensing cats?				
20. Under what circumstance(s) would you return your cat to the Humane Society?				

21. What will yo	u do if your c	at urinates outside	e the li	tter pan?			
-	-			_			
23. It may take y	our cat two w	eeks or longer to	adjust	to its new home	or be	come af	fectionate. Are you prepared
24. A cat may liv	e 12-to-20 yea	ars. Are you prep	ared to	make a commi	tment	to this c	eat for its lifetime?
Please describe a	nd name the	pets you have ow	ned du	ring the past fiv	ve yea	ers:	
Type / Breed	Name	KEPT WHERE?	AGE	ALTERED? (SPAYED/ NEUTERED)	SEX	STILL OWN?	If no, why?
25. For the pets r	named above,	who is your veter	inariar	າ?			
26. What is the c	linic phone nu	ımber?					
27. What vaccina	ations has you	r pet had in the pa	ast yea	r?			
28. When was yo	our pet's last v	visit to a veterinar	ian?	F	Reason	n?	
							Other newspaper
misrepresentation understand that	on of facts ma the Humane investigation	ny result in my lo Society of North of all statements	sing tl Iowa in thi	he privilege of a has the right to	adopti o deny	ing or k y my red	ecognize that any eeping an adopted pet. I quest to adopt an animal, that this application is the
Signature					_ Dat	te	, 20
		Thank	you 1	for your inte	erest	·!	





FOR OFFICE USE ONLY, BELOW THIS LINE

Applicant interviewed:	Date	By
Adoption approval:	Yes	No If no, why not?
Veterinary Check:	All okay	Vaccinations not current or other problems
Landowner's approval:	Yes	No If no, why?
Other comments:		