APPLICATION TO ADOPT A CAT

Please place the letter X in the box that applies to you:

Are you interested in adopting a cat or kittens? Cat(s) (Please note that kittens are usually rehomed in pairs) Have you seen a cat or kitten that you are interested in? If so, type their name(s) here:
Your Full Name:
Full Address:
Email:
Telephone:
YOUR HOME- Please answer the following questions:
Do you own your home? Yes No If not, do you have permission from your landlord? Yes No Please note that written evidence from your landlord will be required prior to a home check.
Do you live near a busy road or railway line? Yes No
Do you live in a House, Bungalow or Flat? House Bungalow Flat
If your answer is Flat, please state which floor:
Do you have a garden? Yes No
Do you have a cat flap? Yes No
Would you be willing to have a litter tray? Yes No
Number of adults and children living in your home:
If any children, what are their ages?
Any visiting children? Yes No
If yes, what are their ages:
OTHER PETS Do you have any other cats? Yes No If yes, please provide how many, their gender and age:
Have they been neutered? Yes No
Have they been vaccinated in the last 12 months? Yes No
What is their character? (playful or shy for example)
Do you have any other pets? If yes, please give details:
YOUR LIFESTYLE What is your current occupation status? Employed Self-emplyed Unemployed Studying Retired
How many hours per day do you expect to leave the cat alone?

Will you keep the cat inside at night? Yes No

Are you planning to move in the next 6 months? Yes No
Are you planning to go on holiday in the next 3 months? Yes No
Are you expecting any change of circumstances in the next 3 months or anything else that is likely to impact on your usual routine in the household; for example: new baby coming, change in working patterns, building works? Yes No If yes please give full details:
We find it useful to know the approximate age of adoption applicants:
YOUR PREFERENCES Please tell us about the sort of personality you are looking for in a cat, such as affectionate or independent:
Must be comfortable around children? Yes No
Must be comfortable with being petted/picked up? Yes No
Must be good with other cats in the house? Yes No
Must be good with dogs? Yes No
YOUR EXPERIENCE Have you had cats before? Yes No If yes please tell us about your experience with cats:
Signed:
Date:

Who will look after the cat if you go away?

By signing and dating this form you confirm that all of the information is true and accurate and realise that no adoption of a cat is possible without a visit to your home by a Worthing Cat Welfare Trust adoption officer.

By giving us your information you are agreeing to the terms of our Privacy Policy and consenting to our collection and use of that information as set out in this policy.

WORTHING CAT WELFARE TRUST, REGISTERED CHARITY, 1049596. adoption@worthingcatwelfaretrust.org/ 07376 644085

