******

Virginia Marsick or Karen Hemza

4370 E 3500 S Road

St. Anne, IL 60964

815-922-2325 or 815-482-4486

sunrisecenteranimalrescue@comcast.net

[www.sunrisecenteranimalrescue.org/](http://www.sunrisecenteranimalrescue.org/)

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Cat Adoption Application**

Male \_\_\_ Female \_\_\_ Pet Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Color \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_

Applicants Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City State Zip County

Hm Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Wk Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_ Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your home in area that is called Urban Suburban Rural

Your home is (please circle all that apply)

Own Rent Home Apartment Condo Townhouse Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you rent, can you provide verification from your landlord/property manager that this pet will be allowed on the property before the application is approved? Yes No

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Landlord’s Name Landlord’s Phone

I agree to a home visit as part of the adoption process for this pet Yes No

I will be the primary care giver for this pet Y N If No, who will? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Briefly give the reason(s) you wish to adopt this pet \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Veterinarian Information:**

Name and Address of Veterinarian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number of Veterinarian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do we have your permission to contact them for information? YES NO

**References:**

Non-related Reference:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you an active member /veteran of any branch of the U.S. Armed Forces? YES NO

How many adults (21 and older) will be living in the household with this pet? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many persons under 21 will be living with this pet or visiting regularly? Please list their ages and sexes.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your home a non-smoking area? Yes No Comments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is any member of your household allergic to pets? Cats \_\_\_ Dogs \_\_\_ Comments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reasons that may cause me to seek another home for this pet (check all that apply)

\_\_\_ Someone in household develops an allergy to the pet

\_\_\_We move to new housing that doesn’t allow pets

\_\_\_We prepare for a new baby

\_\_\_Cat is peeing outside of box or clawing the furniture

\_\_\_\_What other behavior would cause you to consider giving up this pet? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By circling Yes:

Yes No I agree that the pet will not be used for illegal activities

Yes No I agree that the pet is to be kept as a house pet and will never be sold, used for

experimentation purposes or used for breeding or any other activity other than as a companion.

Yes No I agree that I will return the pet to Sunrise Center Animal Rescue if for any reason I am no

longer able to offer the pet a loving home. I will allow at least two weeks for arrangements.

Yes No I absolve Sunrise Center Animal Rescue and all of its representatives from any

liability in reference to this pet or any actions of this pet.

**Pet’s living situation** (check all that apply)

\_\_\_Pet will be a house pet, living inside with the family accessing all parts of the house

\_\_\_Pet will be restricted to certain parts of the house, explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_Pet will be kept in the basement, garage, barn or other non-active part of home

\_\_\_Pet will live outdoors

\_\_\_Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will the pet be outside unattended? Explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where will the pet stay during the day? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at night? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What restrictions will this pet have within the house? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many hours will the pet be alone during a typical day? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What arrangements have I made for care while the pet is alone for weekend or vacations? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This pet will be (check all that apply)

\_\_\_Pet will have run of the house

\_\_\_Pet will be confined to a room or rooms in the house, Explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_Pet will have free unrestricted access to an unfenced yard

\_\_\_ Other, explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Briefly describe your behavior correction process

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list the animals you currently own or have owned in the last 5 years.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Cat or Dog(Include name) | Sex Spayed or Neutered | Inside or Outside Pet? | Current on Vaccinations? | On heartworm prevention? | Deceased? |
|  | M F Y N |  |  Y N |  Y N |  Y N |
|  | M F Y N |  |  Y N |  Y N |  Y N |
|  | M F Y N |  |  Y N |  Y N |  Y N |
|  | M F Y N |  |  Y N |  Y N |  Y N |
|  | M F Y N |  |  Y N |  Y N |  Y N |

Have you ever had to give up a pet YES NO

If YES, why did you give it up? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What happened to the pet you gave up? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you currently own a dog (s) is it friendly with cats? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you worked with an animal rescue agency in the past two years? Y N

Which one?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ What was the result? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***Adoption Agreement***

**Please read each item of this contract and initial the line if you agree**

\_\_\_ I understand that pet ownership is a ***10-20 year commitment*** and I agree to care for this pet for life.

\_\_\_ I agree to train and assist my pet as it goes through the stages of normal pet behavior and

development such as inappropriate litter box use, clawing furniture, nipping.

\_\_\_ I agree to pursue *positive reinforcement only* obedience training if I am unable to train my pet

 successfully.

\_\_\_ I agree to take reasonable precautions when introducing this pet to his/her new environment

and family members to reduce stress and build good relationships

\_\_\_ I verify that all family members are in agreement with the decision to adopt this pet

\_\_\_ I understand that **Sunrise Center Animal Rescue** will be contacting me on a periodic basis to

check on this pets’ status

\_\_\_ **If not already done due to age of pet, I agree to have this pet spayed or neutered by the time it**

**reaches five months of age or I understand that the adoption will be void and the pet has to**

**be returned to Sunrise Center Animal Rescue** **immediately**

\_\_\_ I understand that the adoption fee may include only the following services: Spay/neuter surgery, first

distemper vaccinations, first de-worming, 1 year rabies vaccination

\_\_\_ I understand that further veterinary services for my pet such as flea medication, ear medication,

heartworm preventative and yearly tests, etc., are my responsibility

\_\_\_ I agree to continue appropriate veterinary care including all scheduled vaccinations.

\_\_\_ I agree to have my pet micro-chipped (usually already done by Sunrise) and maintain registration with

the micro-chip company, I also agree to maintain county registration as required in whatever

county/state I reside

\_\_\_ I understand that **Sunrise Center Animal Rescue** has taken every reasonable step to ensure

that my pet is healthy and behaviorally sound. I agree that **Sunrise Center Animal Rescue** cannot be held liable for any behavior or medical problems of this pet with my signature and date below. In the event that the adopter of this pet does not complete the adoption or abide by the terms of this adoption agreement, the adopter will forfeit the pet and the adoption fee.

In the event that the adopter needs to relinquish this pet for any reason, he/she must notify **Sunrise Center Animal Rescue** prior to taking any action and abide by the disposition decisions of the rescue. We request at least a two week notice to return a pet.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date