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The state of the s	Date					
	C	Cat Adoptio	n Application			
Male Female	Pet Name					
Description			_ Color			_ Age
Applicants Name				 		
Address				 		
Street		City	State	Z	ip	County
Hm Phone	Wk P	hone		_ Cell Phor	ne	
Email		 	Age	_ Occupation	on	
ls your home in area tha Your home is (please cir		Urban ()	Suburban	R	ural	
Own Rent Home	Apartment	Condo	Townhouse	Other		
If you rent, can you provon the property before the		•	Yes No	nanager trie	it tills pet w	iii be allowed
Landlord's Nar l agree to a home visit a		option proces	ss for this pet		indlord's Phone	
I will be the primary care	giver for this pe	etYNIfN	lo, who will?			
Briefly give the reason(s) you wish to ad	opt this pet				
Veterinarian Informa	ation:					
Name and Address of V	eterinarian:					
Phone Number of Veteri	narian:					
Do we have your permis	sion to contact	them for info	rmation?	YES	NO	
References:						
Non-related Reference:						
1			Ph	one		
2				one		
Are you an active memb	er /veteran of a	ny branch of	the U.S. Armed	Forces?	YES	NO
How many adults (21 and	older) will be livir	g in the house	ehold with this pe	et?		
How many persons under	21 will he living w	ith this net o	r visiting regularly	/? Please list	their ages ar	nd 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	Sex Spayed	Inside or	Current on	On heartworm	Deceased?
(Include name)	or Neutered	Outside Pet?	Vaccinations?	prevention?	
	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 frie	endly with cats	?			
Have you worked with an animal rescue agency in the past two years? Y N					
Which one?	What was the	result?			





Adoption Agreement

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

Signature	 Date
Signature	Date
rescue. We request at least a two week notice to return	a pet.
Center Animal Rescue prior to taking any action and a	•
In the event that the adopter needs to relinquish this pet	-
terms of this adoption agreement, the adopter will forfeit	·
below. In the event that the adopter of this pet does not	
cannot be held liable for any behavior or medical proble	
that my pet is healthy and behaviorally sound. I agree th	
I understand that Sunrise Center Animal Rescue has tal	
county/state I reside	
the micro-chip company, I also agree to maintain county	registration as required in whatever
I agree to have my pet micro-chipped (usually already done	e by Sunrise) and maintain registration with
I agree to continue appropriate veterinary care including al	I scheduled vaccinations.
heartworm preventative and yearly tests, etc., are my re	
I understand that further veterinary services for my pet suc	
distemper vaccinations, first de-worming, 1 year rabies v	
I understand that the adoption fee may include only the foll	•
be returned to Sunrise Center Animal Rescue imme	-
reaches five months of age or I understand that the	
If not already done due to age of pet, I agree to have th	is pet spayed or neutered by the time it
check on this pets' status	contacting me on a periodic basic to
I understand that Sunrise Center Animal Rescue will be	·
I verify that all family members are in agreement with the d	
I agree to take reasonable precautions when introducing the and family members to reduce stress and build good rel	•
successfully.	sia not to his/har now anyiranment
I agree to pursue <i>positive reinforcement only</i> obedience tra	aining if I am unable to train my pet
development such as inappropriate litter box use, clawir	
I agree to train and assist my pet as it goes through the sta	-
I understand that pet ownership is a 10-20 year commitment	
I had a standard that a standard the standard to the standard	(