

# Cat Pre-Adoption Questionnaire

CHARLEVOIX AREA HUMANE SOCIETY

614 Beardsley Street  
Boyne City, MI 49712  
231-582-6774

## Adoption Fees: **Must be 21 or older to adopt**

Our pets' adoption fees include current vaccinations excluding rabies on some, permanent microchip identification and more!

Adult (6 months and older) - \$50

Kittens (under 6 months) - \$65

Senior Citizens will be charged \$25.00 for a cat over 6 months



### Office Use Only

Vet \_\_\_\_\_ A \_\_\_\_\_  
DNA \_\_\_\_\_ R \_\_\_\_\_  
LL \_\_\_\_\_ PP \_\_\_\_\_

1. \_\_\_\_\_  
Name (First, Last, Middle Initial of **EACH** adult in the house) \_\_\_\_\_ Date of Application \_\_\_\_\_
2. \_\_\_\_\_  
Present Address \_\_\_\_\_ Unit/Apt # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
3. \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Email Address \_\_\_\_\_
4. I want this animal for (please circle all that apply) : For Child Family Pet Companion for Pet Companion for me  
Other (please explain) \_\_\_\_\_
5. Do you own your own home? Y N **If yes, For how long?** \_\_\_\_\_
6. If you rent (this includes property), please provide your landlords contact information below (your landlord will be contacted.)  
Name \_\_\_\_\_ Phone Number \_\_\_\_\_ How long lived here: \_\_\_\_\_
7. Type of Home (please circle) Town Home Apt. Condo House Mobile Home Other \_\_\_\_\_
8. If you own a Condo, have you checked with your homeowners' association regarding their pet policy? Y N
9. How many adults are in the household? \_\_\_\_\_ Children? \_\_\_\_\_ Children's Ages: \_\_\_\_\_
10. Are you over **21**? Y N Are you a student? Y N
11. Are any of the people responsible for this animal employed, if so, where? \_\_\_\_\_
12. Do any members of your household have allergies specific to animals? Y N Please explain \_\_\_\_\_
13. Are there any elderly or disabled persons who live in your household? \_\_\_\_\_
14. Do you already have a veterinarian? Y N If yes, please provide your Veterinarian's Practice Name and Phone number: \_\_\_\_\_
15. May we phone your veterinarian for a reference? Y N If no, please explain: \_\_\_\_\_
16. Please list every pet residing at your home.  
Name Breed/Type Age Sex Spayed/Neutered #of years owned Indoors/Outdoors/Both  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
17. Have you owned any pets in the last five years not listed as current? Y N  
If yes please explain: \_\_\_\_\_
18. Can your veterinarian verify vaccination history on current or past pets? Y N  
If no please explain: \_\_\_\_\_



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19. Have you relinquished or given away any pets before? Y N

If yes, please explain the circumstances involving giving up your pet, i.e. to whom, why and when:

20. Where will your new pet be kept when you are home? \_\_\_\_\_

21. Where would your new pet be kept when you are NOT at home? \_\_\_\_\_

22. In a 24-hour day, how long (Hours) would the pet be left alone at a given time? (Circle One)

2-4 Hours

4-8 Hours

8-12 Hours

12+ Hours

23. If adopting a kitten have you had any previous experiences? Y N

If yes, please explain including the age of the kittens: \_\_\_\_\_

24. Would you like to discuss multi cat household issues prior to introducing your new cat/kitten into your household? Y N

25. Will this cat/kitten share a litter box? Y N If yes, how many litter boxes will be provided? \_\_\_\_\_

26. Location of each litter box? \_\_\_\_\_

27. Are you willing to add additional litter boxes if recommended? Y N If no please explain \_\_\_\_\_

How often is it scooped? \_\_\_\_\_ Completely changed? \_\_\_\_\_ Cleaned? \_\_\_\_\_

28. The adoption of a lifelong animal friend should not be impulsive, but rather a carefully thought out decision, which will ensure a loving, lasting relationship. Remembering that you are applying for a lifetime companion, are you willing to make the investment in both time and finances (up to \$1000 annually) to care for and properly manage your new pet? Y N

29. How much time do you need to prepare for your new pet before taking it home? \_\_\_\_\_

30. Would you be willing to allow a representative to make a home visit at a mutually agreed upon time? Y N

If no please explain: \_\_\_\_\_

31. Will there be any major changes occurring in the next 6 months? (ex: new baby, moving) \_\_\_\_\_

32. What will you do with your pet if you move? \_\_\_\_\_

33. What will you do with your pet when you go away on vacation? \_\_\_\_\_

34. What will you do with your pet if there is a family emergency? \_\_\_\_\_

35. How did you find out about Charlevoix Area Humane Society? (Please circle one below)

T.V.

Paper

Website

Family/Friend

Radio

Yellow Pages

Mobile

Other \_\_\_\_\_



THANK YOU FOR TAKING THE TIME TO  
COMPLETE THIS APPLICATION

\*Permission required for duplication

**NOTES:**