

CAT ADOPTION APPLICATION



	· · · · · · · · · · · · · · · · · · ·	Cat that you are interested in?						
Name:								
Address: (includ	de City and State)							
Phone:		Email:						
ist all pets y	ou currently ha	ve in your home.						
Dog or Cat	Breed	Pets Name	Age	Male or Female	Spayed or Neutered	Comments		
			1		a a			
			3 10	7				
f you rent, Pl	ease provide th	e name and phon	ne numb	er of the pro	perty owner or	manager.		
		e name and phon a cat?		er of the pro	operty owner or	manager.		
Please explai	n why you want			Y				
Please explaid Do you intend If you have a	n why you want d on having this dog, describe h	a cat?cat declawed?	duce you	r new cat to	the dog?			
Please explaid Do you intend If you have a	n why you want d on having this dog, describe h	a cat? cat declawed? ow you will introc	duce you	r new cat to	the dog?			
Please explain Do you intend If you have a Are you awar Veterinary Cl	n why you want d on having this dog, describe h e that cats can inic:	a cat? cat declawed? ow you will introc	duce you	r new cat to	the dog?			

Phone: (479) 695-3450 Fax: (479) 695-3455 Email: ashelter@washingtoncountyar.gov

	e and phone#.			
Discount information				
Are you currently employed by Washington County?	Circle one		Yes	No
Are you over the age of 62?	Circle one		Yes	No
Are you Active Military/Veteran	Circle one		Yes	No
				1000 1000 1000 1000
Applicants must be 18 years of age or older to adopt.	I have filled th	is annlic	ation out	honestly I
understand that omission of information and/or failur application can result in this application being decline after an adoption takes place, I understand that the vareserves the right to annul the adoption and reclaim investigate the information provided as well as conta application passes this review, I agree to a home visit approved adoption. All information contained within Information Act and will be given upon request.	ed. Also, if an o Washington Cou the animal. I giv act veterinarians t by a WCAS rep	mission inty Anii ie the W s and rel	or untrut mal Shelt CAS peri ated offi tive befo	th is discovered ter (WCAS), mission to fully cials. If the re and after an
In addition, I understand the adoption decision is deplimited to the compatibility of the family and home to received on this animal. I understand it is up to WCAS that their decision is final. I am free to apply and und	o the individual S to decide whic	animal, ch home	and other	er applications appropriate and

Phone: (479) 695-3450 Fax: (479) 695-3455 Email: ashelter@washingtoncountyar.gov