



purrfect paws, inc
purrfectpaws@wamego.net
www.purrfectpawskansas.org

ADOPTION APPLICATION

Thank you for contacting **purrfect paws, inc.** We love to place our special felines with committed individuals willing to experience the gift each feline has to offer. We appreciate you completing the following in order to facilitate an appropriate placement.

Caretaker's Name _____

Caretaker's Mailing Address: _____

Name/Number _____ Sex ___ Age ___ Vet Exam ___ Current Shots ___ N/S ___ Declaw ___

Name/Number _____ Sex ___ Age ___ Vet Exam ___ Current Shots ___ N/S ___ Declaw ___

Caretaker's E-Mail Address: _____

Caretaker's Telephone Number: _____

Caretaker's Veterinarian Name and Phone Number _____

Caretaker's Veterinarian's Address: _____

Caretaker's Landlord Name, Address & Phone Number _____

Caretaker gives Purrfect Paws, Inc. permission to call Landlord. Yes ___ No ___

Caretaker gives Purrfect Paws, Inc. permission to call veterinarian at any time. Yes ___ No ___

Caretaker's other pets (names, ages, breeds) _____

Caretaker's other pets who are neutered/spayed or if no, why? Please circle appropriate response.
No other pets...Yes, all our pets are spayed/neutered...Our pets are not neutered/spayed because:

Why do you want a feline pet and how are you prepared to meet any special needs? _____

Will the feline be left alone for periods of time? Yes ___ No ___ If yes, how will needs be addressed? _____

How will you introduce the feline to the new environment? _____

Who will be responsible for feeding, watering and general care of the feline? _____

Will this feline have the option to sleep with the caretaker? Yes ___ No ___

Will this feline have free roaming of the indoor environment? Yes ___ No ___

Where will this feline be kept? Indoors only ___ Indoors/Outdoors ___

Is your residence a house ___ townhouse ___ duplex ___ condo ___ apartment ___ trailer ___?

If this feline will have the option of indoors/outdoors what precautions will you take to insure his/her safety? _____

What do you think is the greatest challenge in choosing to be a feline caretaker? _____

Since this feline will not be declawed how are you prepared to deal with the scratching instincts? _____

How will you train this feline to scratch appropriately? _____

How do you think declawing affects a feline? _____

Veterinary care, food, litter, toys are necessary for feline care.

How much do you think it costs a year for standard veterinary care? _____

How much do you think it costs monthly for food, litter, toys, etc.? _____

Are you prepared for these expenses? _____

Since this feline will remain on a natural or organic wet food have you explored what brands of food are available? _____

How often will you feed this feline? _____

How often will litter be cleaned? _____

How often will litter be changed? _____

How often will water be changed? _____

Have you ever been convicted of a crime? Yes ___ No ___ If yes, please explain: _____

Please list the names and phone numbers of two personal references.

Personal Reference _____ Phone _____

Personal Reference _____ Phone _____

I pledge that the above information is accurate and complete. I acknowledge I have given permission to call my veterinarian, landlord, and personal references.

Caretaker Signature _____ Date _____

Purrfect Paws Representative Signature _____ Date _____

Resources: Web Sites

www.purrfectpawskansas.org

Check us out!!!

www.littlebigcat.com

Check out the free library for information/answers to frequently asked questions

www.spiritessences.com

Learn about spirit essences and available remedies to assist in all aspects of your feline's care

www.holvvet.net

Explore information about vaccinations, optimal pet nutrition, and the use of slippery elm in digestive distress

Resources: Books

Veterinarians' Guide To Natural Remedies For Cats

Dr. Pitcairn's Complete Guide To Natural Health for Dogs & Cats

Natural Health Bible For Dogs & Cats

The Language Of Animals *7 Steps To Communicating With Animals*

The Cat Whisperer

Learning Their Language



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ADOPTION CONTRACT

Hopefully I'll rescue a human today. So many more humans out there who haven't walked this path. So many more humans to be saved.

Caretaker agrees to:

- a. provide feline(s) with the required amount and type of natural or organic food and care as specified by Purrfect Paws, Inc. and appropriate for the feline,
- b. provide adequate clean water to meet the needs of feline(s),
- c. provide adequate shelter and health care, to include regular deworming and routine immunizations,
- d. grant authorized Purrfect Paws, Inc. representatives home visit access to the property where feline(s) is/are located to insure the above conditions are met,
- e. obtain written approval from Purrfect Paws, Inc. prior to transfer of ownership or euthanasia of feline(s),
- f. not declaw,
- g. follow through with checklist for post adoption services,
- h. release information from professionals providing post adoptive services,
- i. accept possession of, title to, and responsibility for the feline being adopted,
- j. release Purrfect Paws, Inc. forever from liability for any injury or damages to any person or property caused by the feline and from any causes of actions, claims, suits or demands whatsoever may arise as a result of such injury or damages,
- k. declare that he/she is aware 1.) That felines are different from human beings in their responses to human action, 2.) That feline behavior is often unpredictable, 3) That feline behavior may change after he/she leaves the care of Purrfect Paws, Inc. and acclimates to a new home and environment, 4.) That Purrfect Paws, Inc. makes no claims as to the temperament, health, or mental disposition of any feline for adoption, and
- l. authorize Purrfect Paws, Inc. to reclaim both possession and ownership of feline(s) if caretaker fails to follow through with this agreement thus constituting a breach of contract, is unable for what ever reason to care for feline(s), and/or post intuitive readings indicate an inappropriate match.

Caretaker Signature _____ Date _____

Purrfect Paws Representative Signature _____ Date _____