

CAT CREW, INC 484-704-0300 catcrewinc@gmail.com
PLEASE RETURN APPLICATION BY MAIL TO: P.O. Box 33, Cedars, PA 19423
OR E-MAIL TO: catcrewinc@gmail.com

Instructions: Thank you for your interest in adopting from Cat Crew. Please complete and sign the application. All applicants must have a vet reference or be willing to have a house check. If the adoption is approved, the applicant will be notified in 48 hours. All adoptions are done on a trial basis. All cats must be taken home in carriers. **ONLY COMPLETE, ACCURATE, AND LEGIBLE APPLICATIONS WILL BE CONSIDERED.**

Date: _____ Description/Name of Pet: _____
Where did you see or hear about this pet? _____
Your Name: _____ Birth Date: _____ Spouse or Housemate Name: _____
How many children are in the household? _____ Ages of all household members: _____
Address: _____
Home Phone: _____ Work Phone: _____ Cell Phone: _____
Email Address: _____
Driver license #: (we also ask for a photocopy when cat is delivered, if approved) _____
Do you own or rent? _____ How long have you lived at your current residence? _____
What is your occupation and place of work? _____
Who will care for your pet when you are away? _____
What is your opinion of declawing? _____
Is this pet a gift? If so, what is the intended recipient's name and address? _____
Tells us about the pets you currently have or had in the past. _____

What is the name and phone number of your vet? _____
What is the name on the vet records? _____
Where will this pet be kept? (circle one) **Indoor** **Indoor/Outdoor**
Do you have a pet door? _____
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Adoption Agreement: Please initial each item and sign the agreement

- _____ *I agree to provide adequate food, shelter and veterinary care for this pet.*
- _____ *I agree not to declaw any cat/kitten adopted from Cat Crew.*
- _____ *If I cannot keep this pet, I agree to return the pet to Cat Crew.*
- _____ *I agree to register this pet's microchip with my contact information and to update the information as needed.*
- _____ *I understand that Cat Crew is a non-profit rescue group and, as such, obtains medical care for the pets to the best of their ability but cannot guarantee the future health of any pet. If my new pet shows any health problems I agree to take him/her to the vet immediately, and I do not hold Cat Crew responsible for the cost of continued veterinary care.*

Signature: _____

For Cat Crew use only Vet Check: _____
Donation: _____ Records sent: _____ Followup Letter: _____ Entered in DB: _____
Followup call #1: _____ Followup call #2: _____
Comments: _____